# State of West Virginia Campaign Financial Statement (Long Form) in Relation to 2024 Election Year

Office Sought: (if applicable)		JOHN R. KEL ESEAR		District/Circuit	' (If annlicable)	Wann
Committee's Treasurer:		NN R. KELLY		District Circuit	(wappiicabie)	
		BOZ BROOK	albert G	PANER	< 44 A C	100/ 7/10
Treasurer's Mailing Addr		304- 428- 28		* ( pm/2500	<u> </u>	100 2610
Treasurer's Daytime Pho	ne:	204. 4 20- 62	977			
ELECT REPORTING PERIOR	) (Filing d	eadlines falling on Saturd	ay, Sunday o	a legal holiday w	vill be exten	ded to the next busi
☐ First Quarter	$ \   \cap$	Primary Report	☐ Second	Quarter	☐ Thir	d Quarter
Due April 1-8, 2024	_	Due Apr 29-May 3,2024	Due July	1-7, 2024	Due	October 1-8, 2024
<b>☑</b> General Report		Fourth Quarter	Amend			Report
Due October 21-25, 20	)24	Due January 1-7, 2025	May be	filed at any time	Zero	balance required
		PEDOPT	TOTALS			
RECEIPTS OF FUND	S	Totals for this Period	IOIALS	CASH E	BALANCE S	SUMMARY
Contributions	(Page 3)	-0-	Regin	ning Balance		r. 23
				g balance from previ	ous report)	5136,=
		+ -6-	Total	Monetary Contri	butions	+
Receipt of a Transfer of Exce Funds	ss (Page 8)	+ -0-	Total	Other Income		+
Total Monetary Contribution	s	= -Ø-				
In-Kind Contributions (	Page 5)	+ -0-	Subto	otal 	a.	i =
Total Contributions		· • • • • • • • • • • • • • • • • • • •				
Total Contributions		+ ~ <i>D</i> -	IJ Tatal	Evnonditures	(Dece 7)	10000
Other Income	(Page 5)			Expenditures  Disbursements of	(Page 7) of	250.00
		-0-	1 1 1	s Funds	(Page 8)	+ ~0-
Loans Received	(Page 6)	+ -0-	Repa	yment of Loans	(Page 6)	+ -0-
Total Other Income:		= -0'	Subto	stal	h	= 250.00
OUTSTANDI	NG LOANS	S & DEBTS			·/*·/*	
Unpaid Bills	(Page 9)	-0-	Endir	g Balance		./- 23
Outstanding Loans	(Page 6)	+ -60 ~	(Subto	tal a Subtotal b.)		= 48865
Total Debts: TOTAL CONTRIBUTION		= ~·O ~ ION YEAR-TO-DATE	\ T			TION YEAR-TO-DA's from all reports)
(Add total contril	6				· · · · · · · · · · · · · · · · · · ·	
	2 55	. 1		<b>!</b>	7514	4 Z

## Page 2

# Contributions of \$250 or Less

7	Check if additional pages have been attached.	5
J	have been attached.	

DATE	l .	Check Qne	AMOUNT
<b>.</b>	OR COMMITTEE'S NAME		
( on the contract of the contr	Colorador F. Jacobson Colorador	Primary General	
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MAKE COPIES	Subtotal of contribut	tors of \$250 or less:	
PAGE AS NEED			

# CONTRIBUTIONS OF MORE THAN \$250

1	Check if additional pages	ŝ
J	have been attached.	

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION	ELECTION Check One	AMOUNT			
verenterviserviserberrerbirererberrerbirer	Full Name:		Pertuit with 1900-2000 en 1900-200 en			
	Address: residential and mailing (if different)	Primary				
	Contributor's occupation :(individual contributor only)					
	Where contributor works: (individual contributor only)	☐ General				
	Affiliation: (political committee only)					
vaaaamiinneihanamalimaamaaaaamaaaaaaaaaaaaaaaaaaaaaaa	Full Name:	gtati kal kali da kal libi da la da	Petatel til dela dela dela dela dela dela dela del			
	Address: residential and mailing (if different)	Primary				
	Contributor's occupation :(individual contributor only)					
	Where contributor works: (individual contributor only)	☐ General				
	Affiliation: (political committee only)	1				
	Full Name:	**************************************	• .			
	Address: residential and mailing (if different)	Primary				
	Contributor's occupation :(individual contributor only)	AND A STATE OF THE				
	Where contributor works: (individual contributor only)	General				
<u> </u>	Affiliation: (political committee only)	The state of the s				
	Full Name:		managan prosperi propi pri pri pri pri pri di dimekamanki kandaman di kandaman kanagan pengupun pri			
	Address: residential and mailing (if different)	Primary				
	Contributor's occupation :(individual contributor only)	An Audit An				
	Where contributor works: (individual contributor only)	General	:			
	Affiliation: (political committee only)					
	Full Name:	dan	BARAFARINI (PARING) PARING PAR			
	Address: residential and mailing (if different)	☐ Primary				
	Contributor's occupation :(individual contributor only)					
	Where contributor works: (individual contributor only)	☐ General	i			
į	Affiliation: (political committee only)					
MAKE COPII	MAKE COPIES OF THIS Subtotal of all contributions of more than \$250					
PAGE AS NE	PAGE AS NEEDED  Subtotal of all contributions of \$250 or less (from page 2) +					
TOTAL CONTRIBUTIONS: =						

### Page 4

#### **FUNDRAISING EVENTS**

7	Check if additional page.	S
	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.

**Monetary Contributions** 

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

#### **EVENT SUMMARY**

	Date of Event  Type of Event  Name of Place Held  Address of Place Held  Contributions of \$250 or Less			Monetary Contributions  Expenditures (from pg. 7)  NET RECEIPTS  Total In-Kind Contributions Related to Fundraiser  Contributions of \$250 or More				
DATE	FULL NAME	ELECTION Check One	AMOUNT	DATE	CONTRIBUTOR INFORMATION	ELECTION Check one	AMOUNT	
		Primary General Primary General			Full Name:  Address:  Contributor's Job: (individual only)  Where contributor works: (individual only)  Affiliation (PAC only)	☐ Primary ☐ General		
		General Primary General Primary General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only)	□ Primary		
		Primary General Primary General Primary General General			Affiliation (PAC only)  Full Name:  Address:  Contributor's Job: (individual only)  Where contributor works: (individual only)  Affiliation (PAC only)	☐ Primary		
		Primary General Primary General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	☐ Primary		
		General Primary General			Subtotal of contributions of more that Subtotal of contributions of \$250			
	Subtotal of contribut \$250	☐ Primary ☐ General ions of or less:			Total Contrib	outions:		

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## Page 5

## OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Total Other Income:	ount
Total Other Incomes	***************************************
Total Other income:	
Total Other income.	
Total Other incomes	
Total Other income:	
Total Other Income	
iotai otilei income:	

### **IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Election	Value
			Check One	
			□ Primary	
			☐ General	
			☐ Primary	
			☐ General	
			☐ Primary	·····
			☐ General	
			☐ Primary	
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			☐ Primary	
			☐ General	
			☐ Primary	
			☐ General	
		Total In-Kind Contributions	:	

#### **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 candidates 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 came 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

Bank Loans: List name & address of financial institution  Candidate Loans: List name, residence	Column A  Balance of previous loan at end of period	Column B Column C  Amount of new loan received during period during period		Column C Outstanding balance at end of period			
address and mailing address of person making or cosigning loan.	Amount	Date	Amount	Date	Amount	Date	Amount
					- <b>-</b> -		••
		Loans	Received	Repaymo	ent of Loans	Outsta	nding Loans
	Totals:						

Page	: 7

## **ITEMIZED EXPENDITURES**

1	Check have b	if aa	lditio	nal	pages
ı	have b	een	attac	hed	1.

Date	Name of Person or Vendor and Address	Purpose	Amount
10-8-24	Name WOOD CO REPUBLICAN WOMEN Address: PARKERS ONCE. LIV 2LIDE Name BLEN FRIENDS OF NRA	DONATION -	50.00 2000
10-11-24	Name BLEN FRIENDS OF NRA Address: PARKERSBURK, WV	DONATION	20000
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		

Total Expenditures: 250.00

<b>Page</b>	8
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## **RECEIPT OF A TRANSFER OF EXCESS FUNDS**

۱ ا	Check	if ac	ldition	al p	ages
١.,	have l	been	attaci	hed.	

Date	Candidate Committee Name and Year	
	• • • • • • • • • • • • • • • • • • • •	
	Total Receipts of Transfer of	
	Excess Funds:	

### **DISBURSEMENT OF EXCESS FUNDS**

Date	Candidate Committee Name and Year Disbursing Excess Funds	Purpose of Disbursement	Amount
····			
<u></u>		otal Disbursements of	

## **UNPAID BILLS**

٦	Check	if ad	lditional	pages
J	have b	een	attache	d.

Date	Owed to Whom	Purpose	Amount
	Name:		
	Address:		
	Name:		
	Address:		
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	Address:		
	Name:		
	Address:		
	Name:		
	Address:		
	Name:		
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	Name:		
·	Address:		
	Name:		
		Total Unpaid Bills:	
		rotal Olipaid Bliss	
	OATH/AFFIRM	ATION	
1	OKN R. KELLY , SWE	ar or affirm that the attached sta	atement is
true an	d accurate, to the best of my knowledge, for all fin	ancial transactions occurring wi	thin the
	covered by this statement, as required by West Vir		willi tiit
	_ /	Q	
	Tolak fell	Signature of Candidata Financial A	* a.a Tanaa
		Signature of Candidate, Financial Agen	t or ireasurer
/		Date 15-21	, 20 2- <del>2</del>
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Office Use Only

Received By:

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