

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



Committee or Candidate Name: Friends of Mike Chapman for Sheriff  
 Office Sought: (if applicable) Sheriff District/Circuit: (if applicable) \_\_\_\_\_  
 Committee's Treasurer: Karen Bailey-Chapman  
 Treasurer's Mailing Address: PO Box 184 Rippon, WV 25441  
 Treasurer's Daytime Phone: (202) 465-4318

**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 |

### REPORT TOTALS

#### RECEIPTS OF FUNDS

Totals for this Period

#### CASH BALANCE SUMMARY

Contributions (Page 3)		0.00
Monetary Contributions from all Fund-Raising Events (Page 4)	+	0.00
Receipt of a Transfer of Excess Funds (Page 8)	+	0.00
<b>Total Monetary Contributions</b>	<b>=</b>	<b>0.00</b>
In-Kind Contributions (Page 5)	+	0.00
<b>Total Contributions</b>	<b>+</b>	<b>0.00</b>

Beginning Balance (ending balance from previous report)		4,105.48
Total Monetary Contributions	+	0.00
Total Other Income	+	0.00
<b>Subtotal a.</b>	<b>=</b>	<b>4,105.48</b>

Other Income (Page 5)		0.00
Loans Received (Page 6)	+	0.00
<b>Total Other Income:</b>	<b>=</b>	<b>0.00</b>

Total Expenditures (Page 7)		2004.10
Total Disbursements of Excess Funds (Page 8)	+	0.00
Repayment of Loans (Page 6)	+	0.00
<b>Subtotal b.</b>	<b>=</b>	<b>2004.10</b>

#### OUTSTANDING LOANS & DEBTS

Unpaid Bills (Page 9)		0.00
Outstanding Loans (Page 6)	+	2,500.00
<b>Total Debts:</b>	<b>=</b>	<b>2,500.00</b>

Ending Balance (Subtotal a. - Subtotal b.)		2,101.38
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**TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE**  
(Add total contributions from all reports)

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

6,900.00

7085.90



**CONTRIBUTIONS OF  
MORE THAN \$250**

Check if additional pages  
have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION	ELECTION Check One	AMOUNT
	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	
	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:**

+	
=	0.00



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

Date	Source of Income	Type of Receipt	Amount
<b>Total Other Income:</b>			0.00

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**IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input checked="" 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	
<b>Total In-Kind Contributions:</b>				0.00



ITEMIZED EXPENDITURES

Check if additional pages have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
4/30/2020	Name: Facebook, Inc Address: 1601 Willow Rd, Menlo Park, CA	Online Ads	83.41
4/30/2020	Name: Google Address: 1600 Amphitheatre Parkway, Mt View, CA	Online Ads	520.84
5/05/2020	Name: The Journal Address: PO Box 807, Martinsburg, WV	Advertising	664.00
5/14/2020	Name: Jefferson County Fair Association Address: Old Leetown Pike, Kearneysville, WV	Fair Catalog Ad	150.00
5/22/2020	Name: Spirit of Jefferson Address: 114 N. Charles St, Charles Town, WV	Advertising	577.85
5/25/2020	Name: City National Bank Address: PO Box 7077, CrossLanes, WV	Print Statement fee April/May	8.00
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
<b>Total Expenditures:</b>			2004.10

**RECEIPT OF A TRANSFER OF EXCESS FUNDS**

*Check if additional pages have been attached.*

Date	Candidate Committee Name and Year	Amount
<b>Total Receipts of Transfer of Excess Funds:</b>		0.00

**DISBURSEMENT OF EXCESS FUNDS**

Date	Candidate Committee Name and Year Disbursing Excess Funds	Purpose of Disbursement	Amount
<b>Total Disbursements of Excess Funds:</b>			0.00



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:		
<b>Total Unpaid Bills:</b>			0.00

**OATH/AFFIRMATION**

I, Karen Briley-Chapman, 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.

 Signature of Candidate, Financial Agent or Treasurer

Date 5/29/20, 20 20

**Office Use Only**

Received By: \_\_\_\_\_