

State of West Virginia Campaign Financial Statement (Long Form) in Relation to 2022 Election Year

Committee or Candidate Name: Carmen Taylor-Bratton

Office Sought: (if applicable) Jefferson County School Board District/Circuit: (if applicable) _____

Committee's Treasurer: Self

Treasurer's Mailing Address: 110 Valley Branch Drive, Ranson, WV 25438

Treasurer's Daytime Phone: 304 820-7107

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

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> First Quarter
Due April 1-7, 2022 | <input checked="" type="checkbox"/> Primary Report
Due April 25-29, 2022 | <input type="checkbox"/> Second Quarter
Due July 1-7, 2022 | <input type="checkbox"/> Third Quarter
Due October 1-7, 2022 |
| <input type="checkbox"/> General Report
Due October 24-28, 2022 | <input type="checkbox"/> Fourth Quarter
Due January 1-9, 2023 | <input type="checkbox"/> Amendment
May be filed at any time | <input type="checkbox"/> Final Report
Zero balance required |

REPORT TOTALS

RECEIPTS OF FUNDS

Totals for this Period

Contributions (Page 3)	365.00
Monetary Contributions from all Fund-Raising Events (Page 4)	+
Receipt of a Transfer of Excess Funds (Page 8)	+
Total Monetary Contributions	= 365.00
In-Kind Contributions (Page 5)	+ 1218.60
Total Contributions	+ 1583.60

Other Income (Page 5)	
Loans Received (Page 6)	+
Total Other Income:	=

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)			517.19
Total Monetary Contributions	+	365.00	
Total Other Income	+		
Subtotal	a.	=	882.19

Total Expenditures (Page 7)			788.56
Total Disbursements of Excess Funds (Page 8)	+		
Repayment of Loans (Page 6)	+		
Subtotal	b.	=	788.56

OUTSTANDING LOANS & DEBTS

Unpaid Bills (Page 9)	
Outstanding Loans (Page 6)	+
Total Debts:	=

Ending Balance (Subtotal a. - Subtotal b.)			= 93.63
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TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE
(Add total contributions from all reports)

1583.60

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

788.56

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
4/2	Darius Taylor	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	120.00
4/9	Lynn Brown	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	25.00
4/10	anonymous	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	20.00
4/20	Eunita Holton	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	100.00
4/20	Perry Bratton	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	100.00
		<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	
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		<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: 385.00

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
	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:

+	
=	

FUNDRAISING EVENTS

Check if additional 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. (WV Code §3-8-5a)

EVENT SUMMARY

Date of Event _____ Type of Event _____ Name of Place Held _____ Address of Place Held _____ _____	Monetary Contributions _____ Expenditures (from pg. 7) _____ NET RECEIPTS Total In-Kind Contributions _____ Related to Fundraiser _____
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Contributions of \$250 or Less

Contributions of \$250 or More

DATE	FULL 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	
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		<input type="checkbox"/> Primary <input type="checkbox"/> General	

DATE	CONTRIBUTOR INFORMATION	ELECTION Check one	AMOUNT
	Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<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	
	Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<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	
	Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<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	
	Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<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	
	Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<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	

Subtotal of contributions of \$250 or less:

Subtotal of contributions of more than \$250:

Subtotal of contributions of \$250 or less:

Total Contributions:

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of Income	Type of Receipt	Amount

Total Other Income:

IN-KIND CONTRIBUTIONS

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
4/1	Teresa Holmes	Graphic Design	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	40.00
4/6	Susan Wall	Newspaper Advertisement	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	111.20
4/9	Barbara Smith	Hotdogs	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	20.00
4/10	Teresa Rutherford	Easter Eggs	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	150.00
4/10	Debra Jenkins	Easter Eggs	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	75.00
4/10	Darius Taylor	Easter Eggs	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	100.00

Total In-Kind Contributions:

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OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of Income	Type of Receipt	Amount

Total Other Income:

[Empty box for Total Other Income]

IN-KIND CONTRIBUTIONS

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
4/13	Susan Wall	Newspaper Advertisement	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	111.20
4/20	Susan Wall	Newspaper Advertisement	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	111.20
4/24	Dewayne Myers	Video Recording and Editing	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	500.00
			<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:

1218.60

ITEMIZED EXPENDITURES

 Check if additional pages
have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
4/1	Name: Amazon Address: On-Line	cutter for cardstock, cardstock for campaign cards, bags for Community Day-Meet the Candidate, Labels for bags	60.88
4/2	Name: Sams Club Address: 1700 Wesel Blvd, Hagerstown, MD 21740	Candy for Easter Eggs-Hunt on Community Day	73.80
4/3	Name: Sams Club Address: 1700 Wesel Blvd, Hagerstown, MD 21740	Candy for Easter Eggs-Hunt on Community Day- Meet the Candidate	149.66
4/4	Name: Hobby Lobby Address: 800 Foxcroft Ave, Martinsburg, WV 25401	T-Shirts, Decor for Community Day- Meet the Candidate	158.53
4/4	Name: Dollar Tree Address: 130 Augustine Ave, Charles Town, WV 25414	Bags for give aways for Community Day-Meet the Candidate	41.08
4/4	Name: Lowes Address: 1500 Wesel Blvd, Hagerstown, MD 21740	Corragated Plastic for large Campaign Sign	36.55
4/6	Name: Sams Club Address: 1700 Wesel Blvd, Hagerstown, MD 21740	Waters for Community Day-Meet the Candidate	23.43
4/6	Name: Sams Club Address: 1700 Wesel Blvd, Hagerstown, MD 21740	Condiments for Hotdogs- Community Day- Meet the Candidate	17.56
4/9	Name: Sams Club Address: 1700 Wesel Blvd, Hagerstown, MD 21740	Hotdogs, Hotdog Rolls, Foil- Community Day- Meet the Candidate	74.02
4/10	Name: Aldi's Address: 246 Retail Commons Pkwy Martinsburg, WV 25403	Snacks- Community Day- Meet the Candidate	65.62
4/22	Name: Amazon Address: On-Line	Paint and Letters for Large Signs	32.81
4/22	Name: Lyvon Campbell DBA Lyvon Campbell Brown Address: 1701 Brookmeade Circle Williamsport, MD 21795	TShirt Design and Printing- Canidate TShirts	26.00
	Name: Address:		
	Name: Address:		
	Name: Address:		

Total Expenditures:

788.56

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:		

DISBURSEMENT OF EXCESS FUNDS

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

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:		
Total Unpaid Bills:			

OATH/AFFIRMATION

I, Carmen Bratton, 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.

Carmen Bratton Signature of Candidate, Financial Agent or Treasurer

Date 4/27/, 2022

Office Use Only

RECEIVED
4-28-22

Received By: S. Paetzli