

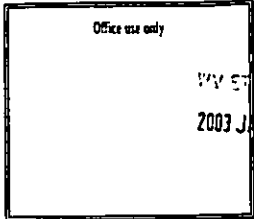


WV-0060

State House of Representatives

BEANE , J D





RECEIVED Annual Financial Disclosure Statement for 2002 (Due February 1, 2003)

NOTE: The information you provide on this form should cover calendar year 2002. Please answer all questions.

1. Name and Address (Please type or print clearly) Mark here if address change

Name J.D. Beane Daytime phone (304) 422-3925
Home address 120 Wedgewood Drive Other phone
City/state/zip Parkersburg, WV 26101 County WOOD
Preferred mailing address P.O. Box 4275, Parkersburg, WV 26104
Other names under which you do business

2. Officeholder Information (complete below as appropriate: current, elected, appointed)

Do you currently hold or are you newly elected to a county, circuit or state elected office? Yes no
If yes, title of office WV House of Delegates

3. Appointed Positions on Boards, Commissions or Agencies

List all state Boards, Commissions or Agencies on which you currently serve by appointment of the Governor
Mark NONE if none Date appointed (if known)
1
2
(Attach additional pages if necessary)

4. 20% Gross Income Categories

Did you receive more than 20% of your gross income during 2002 from one or more of the categories below? Yes no
Please mark with an "X" where appropriate.
Manufacturing, Chemical, Insurance, Retail Sales, Wholesale Sales, Race Track & Promotion, Retail Oil or Gas, Trade Associations, Labor Organizations, Counties Cities or Towns, Professional Associations, Surface Mining, Deep Mining, Mining Equipment, Timbering, Waste Disposal, Intrastate Transportation, Interstate Transportation, Recreation Related, Groups or Associations Seeking to Legalize Gambling, Beer, Wine or Liquor Companies or Distributors, Public Official or Public Employees Associations, Hospital or Other Health Care Providers, Electricity, Gas, Telephone, Water, Banks, Savings & Loan, Loan or Finance Co., Media, Cable TV, Advertising

5. Employment and Other Sources of Income in 2002 (Answer all three sections)

A. YOUR EMPLOYER(S) (Those who furnish you a W-2 tax statement) Mark NONE if not employed last year
Employed by: WV House of Delegates Your title or occupation
Employer address: State Capitol Kanawha Blvd East Charleston WV 25305
Was your gross income from this employer over \$5,000 during the past year? Yes No
Employed by: Your title or occupation
Employer address:
Was your gross income from this employer over \$5,000 during the past year? Yes No
(attach additional pages if necessary)

B. SELF-EMPLOYMENT and/or BUSINESS ACTIVITIES Mark NONE if no self-employment or other business activity
List all names, business activities or self-employment under which you did business last year and the type of activity involved Only businesses or activities that provide a gross income of over \$5,000 must be listed
Examples: Name: Smith and Jones Rentals Activity: Apartment rentals
Name: Richard Jones, self employed Activity: Carpet cleaning
Name: Taylor, Mills & Myer Activity: Lawyers
Name: J.D. Beane, Attorney at Law Activity: Lawyer
Name: Activity:
Name: Activity:
(attach additional pages if necessary)

C. ADDITIONAL SOURCES OF GROSS INCOME OVER \$5,000 (not listed in A or B above)
Note: You are not required to report your spouse's source of income
Mark NONE if you did not receive income over \$5,000 from any additional source last year.
List each source of gross income of over \$5,000 received by you or received by any other person for your use or benefit last year List each source by name, but do not disclose any dollar amounts For each category of income listed, give a brief description of the services for which the income was received
Examples: Source: ABC Investment Corp Source: State of WV Source: Our Bank, U.S.A.
Service performed: Dividends Service performed: Retirement Income Service performed: Interest
Source:
Service performed:
Source:
Service performed:
(attach additional pages if necessary)

6. List ALL 2002 Sales or Contracts with Governmental Agencies (including goods or services)

List all sales of goods, or professional or other services provided to any governmental agency (State, County, Municipal or other local governmental agency) made in 2002 in your name or through a partnership, corporation or association in which you owned or controlled an interest of more than 10% (Attach additional pages if necessary)
Mark NONE if you had no sales or contracts with any governmental agency.
Agency:
Describe goods or services:
Agency:
Describe goods or services:

7. Gifts

List the name of any person with a direct and immediate interest in a governmental activity over which you have control who gave a gift, including meals & beverages, during 2002 to you, your spouse, or anyone dependent on you for their financial support, if the total value of all such gifts from the person to you, your spouse and dependents was, when added together, over \$100.

DO NOT LIST GIFTS FROM:

- 1 your spouse, child, grandchild, parent or grandparent
- 2 a trust established by your spouse, child, grandchild or any ancestor
- 3 a will or by virtue of the laws of descent and distribution

Mark "NONE" if you had no gifts as indicated above.

A _____ B _____
 C _____ D _____

8. Debts to Others in Excess of \$12,500

List the names of all persons residing or transacting business in the state, to whom you owe on the date this statement is executed more, in total, than \$12,500. Include debts you owe in the name of any other person and debts on which you are a cosigner

YOU DO NOT HAVE TO REPORT:

- 1 debts to immediate family members, parents, or grandparents
- 2 home mortgages for your primary and secondary residences
- 3 loans for autos maintained for the use of your immediate family, student loans
- 4 debts resulting from the ordinary conduct of your business, profession or occupation
- 5 debts to a financial institution or to a credit card company

HOWEVER, if any debt over \$12,500, exempted above, required the approval of the state or any of its political subdivisions, the debt must be reported

Mark "NONE" if you had no debts as indicated above.

A _____ B _____
 C _____ D _____

9. Debts from Others in Excess of \$12,500

List the names of all persons residing or transacting business in the state, who owe you on the date this statement is executed more, in total, than \$12,500 either in your name or any other person for your use or benefit

YOU DO NOT HAVE TO REPORT:

- 1 debts from immediate family members, parents, or grandparents
- 2 debts resulting from the ordinary conduct of your business, profession or occupation
- 3 demand or saving accounts in banks, savings and loan associations, or other similar depositories
- 4 loans by you to any business in which you have an ownership interest

Mark "NONE" if you had no debts as indicated above.

A _____ B _____
 C _____ D _____

10. Verification Before a Notary

I do hereby solemnly swear or affirm that the information contained hereon and on the attached pages, if any is to the best of my knowledge, true, correct and complete

✓ Your signature: J.D. Beane Date: 1/26/03

STATE of WV, COUNTY of WOOD Given under my hand this 1 day of Jan 2003 My commission expires: April 25 2003

✓ (Notary signature): T. Wade & Family Notary Public

Notary Seal

John Beane
 Notary Public State of West Virginia
 Symbol: Scale
 #0 22848
 Exp. 04/25/03
 My Comm. Expires 04/25/03



NAME: Hon. J. D. Beane BEANE39251
 POSITION: House of Delegates, 10th Dist.
 [1]

Return completed form to
 WV Ethics Commission
 1207 Quarrier St.
 Charleston WV 25301
 (304) 558-0664
 toll free (1-866-558-0664)

**WV Ethics Commission
 Annual Financial Disclosure Statement for 2002**
(WV Code §§6B-2-6, 6B 2-7)
 [Due February 1, 2003]

Our records indicate that you are required to file a Financial Disclosure Statement covering calendar year 2002. If you have terminated or resigned your appointed or elected position, or, if you are not in public service on February 1, 2002, you are not required to file this form. We request, however, that you notify the Ethics Commission in writing of your reason for not filing so that our records can be corrected

- Completed forms are due February 1, 2003
- File by mail or in person at the Ethics Commission office, 1207 Quarrier St., 4th Floor, Charleston WV 25301
- All questions must be answered. You must provide an answer or mark "None" for each question. The form will be returned if any questions are left blank.
- Please remember to have your signature notarized before sending in this form. A notary is available at the Commission office for those filing in person.

If you have any questions on how to complete the form please call the Ethics Commission at (304) 558-0664. Toll free (1-866-558-0664)

Completed forms are available for public inspection at the Ethics Commission office

Note: The knowing failure or refusal to file a required financial disclosure statement is a misdemeanor punishable by a fine of not less than \$100 nor more than \$1,000.