

Revised: 09/2021

SUPREME COURT JUSTICE



Return completed form to:
ellen.m.briggs@wv.gov or
WV Ethics Commission
210 Brooks Street, Suite 300
Charleston, WV 25301

West Virginia Ethics Commission Financial Disclosure Statement

Received
JAN 19 2022
WV Ethics Commission

Contact Information and Signature Sheet (This Sheet will not be placed on the Internet.)

By law, only certain public officials, public employees, and candidates must file a Financial Disclosure Statement. To assist us in processing your form, please mark which category applies to you. I am:

on a board/commission/agency to which the Governor appointed me (specify in Question No. 3)

an elected state or county official or candidate (specify in Question No. 2)

an elected city official or candidate in one of the following municipalities: Charleston, Fairmont or Morgantown (specify in Question No. 2)

a state executive branch employee. For more information on which "state executive branch employees" must file, see the FDS Information Sheet or go to ethics.wv.gov. (If employed during the past calendar year as a state executive branch employee, specify in Question No. 5 and 13)

Please print clearly

Filer's last name: Wooton First name: William R.
Spouse's last name: Wooton First name: Shirleibeth
County: Raleigh
Mailing address: 1004 Dogwood Lane
Beckley, WV 25801

Email: Bill.Wooton@courtswv.gov

Daytime telephone: (304) 558-2606

Signature and Acknowledgement

I hereby acknowledge, under penalty of perjury, that the information contained in my attached Financial Disclosure Statement, including all attached worksheets, is to the best of my knowledge true, correct and complete.

Filer's signature: William R. Wooton Date: 19 January 2022

Name: William R. Wooton

4. Business Names

List all names under which you and/or your spouse conducted or did business during the past calendar year. If you or your spouse were self-employed, list the name or names under which you or your spouse conducted the business, trade, sole proprietorship or profession.

Mark here if no business names to report.

self spouse Nancy's LLC

self spouse

self spouse

5. Employment

For you and your spouse, list the name and address of each full-time or part-time employer(s) during the past calendar year. Include all employment with city, county or state government as well as employment in the private sector. Provide your job title and a general description of your job duties. For purposes of this question, an employer is one who provides you with a W-2 form. This does not include self-employment if listed elsewhere on the Financial Disclosure Statement.

Mark here if neither you nor your spouse were employed.

	Employer Name and Address	Job title and duties of your position
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/>	1. WV Supreme Court of Appeals Charleston, WV	Justice
self <input type="checkbox"/> spouse <input type="checkbox"/>	2.	
self <input type="checkbox"/> spouse <input type="checkbox"/>	3.	
self <input type="checkbox"/> spouse <input type="checkbox"/>	4.	

6. 20% Gross Income Categories for you and your spouse

Did you or your spouse receive more than 20% of your gross income during the past calendar year from any one or more of the categories listed below? Yes No If yes, mark with an 'X' all categories that apply to you and/or your spouse.

<p><i>self</i> <i>spouse</i></p> <p><u>COMPANIES</u></p> <p><input type="checkbox"/> Advertising</p> <p><input type="checkbox"/> Beer, wine or liquor (or distributor)</p> <p><input type="checkbox"/> Brokerage/Financial Advisor</p> <p><input type="checkbox"/> Cable television</p> <p><input type="checkbox"/> Chemical</p> <p><input type="checkbox"/> Construction</p> <p><input type="checkbox"/> Insurance</p> <p><input type="checkbox"/> Interstate transportation</p> <p><input type="checkbox"/> Intrastate transportation</p> <p><input type="checkbox"/> Manufacturing</p> <p><input type="checkbox"/> Media</p> <p><input type="checkbox"/> Promotional</p> <p><input type="checkbox"/> Race tracks</p> <p><input type="checkbox"/> Recreation</p> <p><input type="checkbox"/> Retail</p> <p><input type="checkbox"/> Timber</p> <p><input type="checkbox"/> Wholesale</p> <p><input type="checkbox"/> Waste disposal</p>	<p><i>self</i> <i>spouse</i></p> <p><u>MINING</u></p> <p><input type="checkbox"/> Surface mining</p> <p><input type="checkbox"/> Mining equipment</p> <p><input type="checkbox"/> Deep mining</p> <p><u>OIL OR GAS</u></p> <p><input type="checkbox"/> Retail</p> <p><input type="checkbox"/> Wholesale</p> <p><input type="checkbox"/> Exploration</p> <p><input type="checkbox"/> Production & Drilling</p> <p><u>UTILITIES</u></p> <p><input type="checkbox"/> Electric</p> <p><input type="checkbox"/> Gas</p> <p><input type="checkbox"/> Telephone</p> <p><input type="checkbox"/> Water</p> <p><u>FINANCIAL</u></p> <p><input type="checkbox"/> Banks, Savings & Loan Assoc.</p> <p><input type="checkbox"/> Loan or Finance Companies</p>	<p><i>self</i> <i>spouse</i></p> <p><u>GOVERNMENT</u></p> <p><input type="checkbox"/> City or town</p> <p><input type="checkbox"/> County</p> <p><input checked="" type="checkbox"/> State</p> <p><u>ASSOCIATIONS OR ORGANIZATIONS</u></p> <p><input type="checkbox"/> Labor Association/Organization</p> <p><input type="checkbox"/> Professional Association</p> <p><input type="checkbox"/> Association that promotes gaming or lottery</p> <p><input type="checkbox"/> Association of public employees or public officials</p> <p><input type="checkbox"/> Trade Association or Organization</p> <p><u>OTHER</u></p> <p><input type="checkbox"/> Economic Development</p> <p><input type="checkbox"/> Hospitals or other health care providers</p> <p><input type="checkbox"/> Information Technology</p> <p><input type="checkbox"/> Legal service providers</p> <p><input type="checkbox"/> Lobbying</p>
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Name: William R. Wooton

11. DEBTS

A. Owed to others on the date you sign this form: List the names of all persons residing or transacting business in the state who you owe more than \$5,000 (in the aggregate) on the date of this Statement. 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
4. Student loans
5. Debts resulting from the ordinary conduct of your business, profession or occupation
6. Debts to a financial institution or to a credit card company

If any debt over \$5,000, which is otherwise non-reportable, required the approval of the state or any of its political subdivisions, or if a loan was obtained from the "Linked Deposit Program" (W. Va. Code § 12-1A-1 et seq.), you must list the debt.

Mark here if you owe no debts as described above.

B. Owed to you on the date you sign this form: List the names of all persons residing or transacting business in the state who owe you, in the aggregate, more than \$5,000 on the date of this Statement (either in your name or any other person's name 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 here if you had no debts owed to you as described above.

12. GIFTS

A gift is anything with monetary value, including meals and beverages. During the past calendar year, if you, your spouse, and/or any of your dependents received one or more gifts whose total value is more than \$100 from a person, business or organization which has a direct and immediate interest in a governmental activity over which you have control, then list the name of each giver UNLESS it falls into one of the exceptions listed below. "Total value" includes the cumulative fair market value of all gifts from the same source, directly or indirectly, during the past calendar year.

Gifts from the following sources need **NOT** be reported:

1. your spouse, child, grandchild, parents or grandparents
2. a trust established by your spouse, child, grandchild or ancestor
3. a will or lawful inheritance in the absence of a will
4. a registered lobbyist (*registered lobbyists report these expenditures on the Lobbyist Schedule A form with their Lobbyist Activity Reporting forms*)

Mark here if you received no gifts as described above.

Name: William R. Wooton

13. ALL sources of income over \$1,000 including employment during the past calendar year (To determine if you must disclose income information about your spouse, refer to Worksheet A)

- a. List every source or category of income or employment over \$1,000 received by you and/or your spouse during the past calendar year in your name, or by any other person for your use or benefit. Include employment even if listed elsewhere on this Statement.
- b. Include distributions received from retirement and pension accounts.
- c. Do not list specific names of clients or customers. For example, if you are a lawyer or an insurance agent, do not list the names of your clients.
- d. Do not disclose actual dollar amounts of income, only the source.

Indicate if the income was received by you or your spouse by marking the appropriate box in the chart below.

Categories of income over \$1,000	Description (or job title)
self <input checked="" type="checkbox"/> spouse <i>Example: Social Security</i>	<i>U.S. Government</i>
self <input checked="" type="checkbox"/> spouse <i>Example: Sold real estate</i>	<i>Sold residence in Beckley</i>
self <input checked="" type="checkbox"/> spouse <i>Example: Farming/timber</i>	<i>Sold timber from my farm</i>
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/> <i>Example: Employment</i>	<i>Teacher, Mingo County schools</i>
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/> Social Security	U.S. Government
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Army Pension	U.S. Government
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Pacific Life Insurance	Annuity
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Wells Fargo	IRA
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/> Voya Financial	IRA
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> State of West Virginia	Supreme Court Salary

14. Business and/or Property Interests (To determine if you must disclose business or property interests of your spouse, refer to Worksheet A)

List the name and address of each business in which, during the past calendar year or at present, you or your spouse held an interest with a fair market value of \$10,000 or more including, but not limited to: non-publicly owned businesses, publicly or privately traded stocks, bonds or securities, including those held in self-directed retirement accounts, and commercial real estate. (For purposes of this question, DO NOT include mutual funds or specific holdings in mutual funds or retirement accounts. However, distributions from retirement accounts must be reported in question 13 if they are greater than \$1,000 annually.) Attach additional sheets if necessary.

Mark here if neither you nor your spouse had any interest in a business or real estate as described above.

self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> <i>Example: Jones Coal Hauling, 123 Main Street, Placeville WV</i>
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> <i>Example: Stonefront Apartment Building, 123 Main Street, Charleston WV 25312</i>
self <input checked="" type="checkbox"/> spouse <input checked="" type="checkbox"/> <i>Example: Acme Bank Stock, 788 Water Street, Cincinnati OH 34343</i>
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> Disney
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Ashland, Marathon Petroleum, Valvoline, City of Holding Co.
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Nancy's LLC

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