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



| Committee or Ca  | ndidate Name:              | Osmund Ande  | erson            |  |                 |                                       |
|--|----------------------------|--|------------------|--|-----------------|---------------------------------------|
| Office Sought: (if a   | applicable) Magis          | strate   |                  | District/Circuit:                      | (if applicable) | District 3                            |
| Committee's Trea   | Dhilin                     | oe C Cote  |                  |  |                 |                                       |
| Treasurer's Maili  | ng Address:                | '3 Sunset Lan  | e Harpers Fe     | rry WV 25425                           |                 |                                       |
| Treasurer's Dayti  |                            | 3047282234   |                  |  |                 |                                       |
| SELECT REPORTING   | PERIOD /Filing             | deadlines fallina on   | Saturday Sunday  | or a legal holiday y                   | ill he evter    | nded to the next business day.        |
| First Quarte   |                            | Second Quarter   | Third            | Quarter                                | Fou             | rth Quarter                           |
| Due April 1-7  |                            | Due July 1-7   | — Due C          | ctober 1-7                             | — Due           | January 1-7                           |
| Primary Rep  Due 15 days p  to Primary Ele  or within 4 bu  days thereafte | orior<br>ection<br>usiness | General Report  Due 15 days prior  to General Electic  or within 4 busing  days thereafter | r May bon any ti | idment<br>pe filed at<br>me            | 1 1             | l Report<br>balance required          |
|  |                            | RE   | PORT TOTALS      |  |                 |                                       |
| RECEIPTS O   | F FUNDS                    | Totals for this P  | Period           | CASH E                                 | BALANCE S       | SUMMARY                               |
| Contributions  | (Page 3)                   | 50.00  |                  | inning Balance ing balance from previo | ous report)     | 75.00                                 |
| Monetary Contributi<br>Fund-Raising Events                                 |                            | +  | -                | al Monetary Contri                     |                 | +                                     |
| Receipt of a Transfer Funds  | of Excess<br>(Page 8)      | +  |                  | al Other Income                        |                 | +                                     |
| Total Monetary Cont  | ributions                  | =  | [1]              | total                                  | a.              | = 75.00                               |
| In-Kind Contributions  | s (Page 5)                 | +  |                  | totai                                  | a.              |                                       |
| Total Contributions  |                            | + <sup>50.00</sup>   |                  |  | ×               |                                       |
|  |                            | T  | Tot              | al Expenditures                        | (Page 7)        | 316.07                                |
| Other Income   | (Page 5)                   | 25.00  |                  | al Disbursements o<br>ess Funds        | of<br>(Page 8)  | +                                     |
| Loans Received   | (Page 6)                   | +  | Rep              | payment of Loans                       | (Page 6)        |                                       |
| Total Other Income:  |                            | = 25.00  |                  | ototal                                 | AUMOUS          | <sub>=</sub> 316.07                   |
| OUT  | CTANIDING LOAD             | NC 9 DERTC   | Jun              | rtotai                                 | υ,              |                                       |
|  | STANDING LOAI              |  |                  |  | -               |                                       |
| Unpaid Bills   | (Page 9)                   |  |                  | ling Balance<br>total a Subtotal b.)   |                 | 316.07                                |
| Outstanding Loans  | (Page 6)                   |  |                  |  |                 |                                       |
|  |                            | = <sup>0</sup><br>TION YEAR-TO-DA  | ATE              |  |                 | TION YEAR-TO-DATE s from all reports) |
|  | al contributions f         | rom all reports)   |                  | 316.07                                 |                 |                                       |
| 50.00  |                            |  |                  |  |                 |                                       |

# **Contributions of** \$250 or Less

| Check if additional pages |
|---------------------------|
| have been attached.       |

| DATE                        | CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME | ELECTION<br>Check One   | AMOUNT |
|-----------------------------|---|-------------------------|--------|
| 2/05/20                     | Wayne Casto                                 | <b></b> ✓ Primary       | 50.00  |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | ☐ General               |        |
|                             |   | Primary                 |        |
|                             |   | ☐General                |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | ☐ General               |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | ☐ General               |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 | 7.0    |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
|                             |   | Primary                 |        |
|                             |   | General                 |        |
| MAKE COPIES<br>PAGE AS NEEI | OF THIS                                     | butors of \$250 or less | 5:     |

# **CONTRIBUTIONS OF MORE THAN \$250**

| ٦ | Check if additional pages |  |
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| DATE                    | INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION       | ELECTION<br>Check One | AMOUNT |
|-------------------------|---|-----------------------|--------|
|                         | Full Name:  |                       |        |
|                         | Address: residential and mailing (if different)         | Primary               |        |
|                         | Contributor's occupation :(individual contributor only) |                       |        |
|                         | Where contributor works: (individual contributor only)  | General               |        |
|                         | Affiliation: (political committee only)                 |                       |        |
|                         | Full Name:  |                       |        |
|                         | Address: residential and mailing (if different)         | ☐ Primary             |        |
|                         | Contributor's occupation :(individual contributor only) |                       |        |
|                         | Where contributor works: (individual contributor only)  | General               |        |
|                         | Affiliation: (political committee only)                 |                       |        |
| ,                       | Full Name:  |                       |        |
|                         | Address: residential and mailing (if different)         | Primary               |        |
|                         | Contributor's occupation :(individual contributor only) |                       |        |
|                         | Where contributor works: (individual contributor only)  | General               |        |
|                         | Affiliation: (political committee only)                 |                       |        |
|                         | Full Name:  |                       |        |
|                         | Address: residential and mailing (if different)         | Primary               |        |
|                         | Contributor's occupation :(individual contributor only) |                       |        |
|                         | Where contributor works: (individual contributor only)  | General               |        |
|                         | Affiliation: (political committee only)                 |                       |        |
|                         | Full Name:  |                       |        |
|                         | Address: residential and mailing (if different)         | Primary               |        |
|                         | Contributor's occupation :(individual contributor only) |                       |        |
|                         | Where contributor works: (individual contributor only)  | General General       |        |
|                         | Affiliation: (political committee only)                 |                       |        |
| MAKE COPIES PAGE AS NEE |   | nore than \$250       |        |

Subtotal of all contributions of \$250 or less (from page 2)

**TOTAL CONTRIBTUIONS:** 

| (1 to 1 to | - 1191014 |      |
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| ¥ _                                      |           |      |
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|  |           | <br> |
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## Page 4

#### **FUNDRAISING EVENTS**

|   | Check | k if aa | lditional | pages |
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| J | have  | been    | attache   | d.    |

Monetary Contributions \_\_\_\_\_

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)

Date of Event \_\_\_\_\_

Subtotal of contributions of \$250 or less:

#### **EVENT SUMMARY**

|     | Name of Place Held  Address of Place Held  Contributions of \$250 or Less |   |        | Expenditures (from pg. 7)  NET RECEIPTS  Total In-Kind Contributions Related to Fundraiser  Contributions of \$250 or More |  |                        |        |  |
|-----|---|---|--------|--|--|------------------------|--------|--|
| ATE | FULL NAME   | ELECTION<br>Check One                           | AMOUNT | DATE   | CONTRIBUTOR INFORMATION  | ELECTION<br>Check one  | AMOUNT |  |
|     |   | Primary General Primary General Primary General |        |  | Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only) | □ Primary<br>□ General |        |  |
|     |   | Primary General Primary General                 |        |  | Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only) | ☐ Primary<br>☐ General |        |  |
|     |   | General Primary General Primary General Primary |        |  | Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only) | ☐ Primary<br>☐ General | ]      |  |
|     |   | Primary General Primary General Primary General |        |  | Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only) | ☐ Primary<br>☐ General | 1 1    |  |
|     |   | Primary General Primary                         |        |  | Subtotal of contributions of more than<br>Subtotal of contributions of \$250 of  |                        | _      |  |
|     |   | General   |        |  | Total Contrib  | utions.                |        |  |

# 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  | Value |
|------|----------------------------------|-----------------------------|-----------|-------|
|      |                                  | ·                           | Check One |       |
|      | F                                |                             | ☐ Primary |       |
|      | 5                                |                             | ☐ General |       |
|      |                                  |                             | ☐ Primary |       |
|      |                                  |                             | ☐ General |       |
|      |                                  |                             | ☐ Primary |       |
|      |                                  |                             | ☐ General |       |
|      |                                  |                             | ☐ Primary | -     |
|      |                                  |                             | ☐ General |       |
|      |                                  |                             | ☐ Primary |       |
|      |                                  |                             | ☐ General |       |
|      |                                  |                             | ☐ Primary |       |
|      |                                  |                             | ☐ General |       |
|      |                                  | Total In-Kind Contributions | 5:        |       |

#### **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 address and mailing address of person | Column A  Balance of previous loan at end of period | Amount | umn B of new loan during period | Repa    | yments<br>g period | Outstan | lumn C<br>ding balance<br>I of period |
|---|---|--------|---------------------------------|---------|--------------------|---------|---------------------------------------|
| making or cosigning loan.   | Amount  | Date   | Amount                          | Date    | Amount             | Date    | Amount                                |
|   |   |        |                                 |         |                    |         |                                       |
|   |   |        |                                 | i       |                    |         |                                       |
|   |   |        |                                 |         |                    |         |                                       |
| 1000  | <u></u>   | Loans  | Received                        | Repaymo | ent of Loans       | Outsta  | nding Loans                           |
|   | Totals:   |        |                                 |         |                    |         |                                       |

# Page 7

## **ITEMIZED EXPENDITURES**

| 7 | Check if additional pages |  |
|---|---------------------------|--|
| ┚ | have been attached.       |  |

| Date    | Name of Person or Vendor and Address                               | Purpose                    | Amount |
|---------|--|----------------------------|--------|
| 2/23/20 | Name: My Parking Sign Address: Myparkingsign.com                   | Stencil for Campaign signs | 79.85  |
| 2/19/20 | Name: Signs on the Cheap Address: signsonthecheap.com              | Yard Signs                 | 182.52 |
| 2/27/20 | Name: Office Depot  Address: 745 Foxcroft AVE Martinsburg WV 25401 | Business Cards 12pt Matte  | 10.70  |
| 2/18/20 | Name: Office Depot  Address: 745 Foxcroft AVE Martinsburg WV 25401 | Business Cards Matte Gloss | 10.70  |
| 2/27/20 | Name: Office Depot  Address: 745 Foxcroft AVE Martinsburg WV 25401 | Voter ID Tags              | 10.70  |
| 2/27/20 | Name: Office Depot  Address: 745 Foxcroft AVE Martinsburg WV 25401 | Voter ID Clips             | 21.60  |
|         | Name: Address:   |                            | £)     |
|         | Name: Address:   |                            |        |
|         | Name:<br>Address:  |                            |        |
|         | Name: Address:   |                            |        |
|         | Name: Address:   |                            |        |
|         |  |                            |        |

Total Expenditures:

316.07

| Pa | ge | 8 |
|----|----|---|
|    |    |   |

## **RECEIPT OF A TRANSFER OF EXCESS FUNDS**

| ì | Check  | if ad  | ditional | pages |
|---|--------|--------|----------|-------|
|   | have b | neen i | attache  | d.    |

| 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  |        |

| Page | 9 |
|------|---|
|------|---|

# **UNPAID BILLS**

|   |        |      | ditional |    |
|---|--------|------|----------|----|
| J | have b | been | attache  | d. |

| 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:                    |                                       |  |  |
|             | Total Origina Dills.   |  |                                       |  |  |
|             |  |  |                                       |  |  |
|             | OATH/AFFIRM  | ATION                                  |                                       |  |  |
| D           |  |  |                                       |  |  |
| 1, <u>T</u> | hilippe C. Côte swee   | ar or affirm that the attached sta     | atement is                            |  |  |
|             | nd accurate, to the best of my knowledge, for all fin                        |  | thin the                              |  |  |
|             | period covered by this statement, as required by West Virginia Code §3-8-5a. |  |                                       |  |  |
| /,          | Stine C. Cot.  |  |                                       |  |  |
| A           | inge . Col   | Signature of Candidate, Financial Ager | t or Treasurer                        |  |  |
|             |  | Date 4/2                               | , 20 <u>2 0</u>                       |  |  |

| Office Use Only |  |
|-----------------|--|
| Received By:    |  |