

West Virginia Ethics Commission

WW Ethics Commission

Lobbyist Activity Report Form

2019-03

Late reporting fine - \$10 per business day past the due date (\$250 maximum)

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

304-558-0664 No faxed copies

 For office use only:

 Postmark
 Rec'd

 Days late
 Fine

| 1. Na | ame and co | ntact information | | | | | | | | |
|---------------------|----------------------|-----------------------|----------------|------------------|------------------|---------------|---|----------------|------------------|----------------|
| Name | Julie Wa | rden | | | | | Phone 3 | 04-342-9188 | | |
| | | 1114 Quarrier S | St | | | D., | siness Email jul | ie@wvfree.org | | |
| Busine | ss Address | | | | | Bu | siness Email 7 | | | |
| | | | | | | | | | | |
| City, St | ate Zip Ch | narleston, WV 2530 | 01 | | | | | | | |
| | | | | | | | | | | |
| 2. Re | eporting pe | riod for which this a | ctivity report | is being filed | | 1 | | | | |
| Check | | | | | | | | | | |
| х | 2019-3 | 9/1/19 - 12/31/19 | 1/15/2020 | THE RESERVE | | | | | | |
| | | | | | | | | | | |
| | | | | | 19 119 | | | | | |
| 3. Li | st all emplo | yers/organizations | that you repr | esent as a lobb | yist | | Use | additional rep | orting forms if | necessary. |
| W/V FREE | | | | | | | | | | |
| WALEBEE A. V. E. A. | | | | | | | | | | |
| 2. | VVV FRE | EE Action Fund | | | | 5 | | | | |
| 3. | 36 | | | | | | | | | |
| | | | | | | | | | | |
| 4. Lo | bbying act | ivity summary - If th | ere was no a | ctivity or expen | nditu | res, indicate | "none." | | | |
| Food | | | | | | | A 100 A | | | |
| 1 000 | | | | | - | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 5. Ex | penditures | 5 | | | | | | | | |
| | | s, including campaig | | | | | | | | |
| | | y on any public offic | | | | | | the amounts sp | ent in each of t | he following |
| | | ch employer you rep | | | | | T | T = 1 = 5 | E-valaria 6 | 7.1.1.5d.d |
| - | diture Cate | | Employer 1 | Employer 2 | - | mployer 3 | Employer 4 | Employer 5 | Employer 6 | Total Expended |
| A. | | Beverages | \$ | \$ | \$ | | \$ | \$ | \$ | \$50.46 |
| B. | Lodging | | \$ | \$ | \$ | | \$ | \$ | \$ | \$ |
| D. | Advertisin Travel | ig | \$ | \$ | \$ | | \$ | \$ | \$ | \$ |
| E. | Gifts | | \$ | \$ | \$ | | \$ | \$ | \$ | \$ |
| F. | Other Exp | enses | \$ | \$ | \$ | | Ś | \$ | \$ | \$ |
| G. | | penditures | \$ | \$ | \$ | | Ś | Ś | \$ | \$ |
| Н. | | | | | L EXPENDED" COLU | | | | | \$ |
| 1. | - | all expenditures | \$ | \$ | \$ | | s | \$ | \$ | \$25.20 |
| | | or contributed to an | - | | - | | 1 | | nediately above | 1 |

If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and attach a Schedule B for each event.

| | | Name: Ju | lie Warden | | Date: 12/18/19 | | | |
|--|--|---|---|--|--|--------------------------------|------------|----------------------------|
| Schedule A: WV Lol Attach this completed shee | | | | | | | | |
| Complete this form if you had during this reporting period. Gifts, (5) Other Expenditures | If you have ma | de expenditures | in these categ | ories - (1) A | Aeals & Bev | | | |
| f you shared any of these ex name. You are not required ontributions] and Group En chedule B. | to report on Sch | nedule A detailed | dexpenditures | on Adverti | sing, Contril | butions [inclu | uding po | litical |
| L. Expenditure Details | - (include share | d expenditures i | not reported o | n Schedule | B) | | | |
| Report all expenditures in an hose reported in Section 1a reported on Schedule B. Tra obbyist, identify who share | ny of the categor or 2 (below) or ansfer the totals d the cost in the | ries listed below any portion of a to section 5 on t area below each | on a particular "Group Enter he Lobbyist Ac recipient's na | person or tainment" (tivity Repo me. | member of OR "Shared rt. If you sh | Expense" eva ared expend | ent which | h are to be ith another |
| Recipient name(s) and date | of expenditure | Meals & beverages | Lodging | Travel | Gifts | Other | Total expe | |
| John Doyle - 12.6.2 | 2019 | 12.60 | | | 1 | | 12.60 | |
| Sammi Brown - 12.6. | | 12.60 | | | | | | 12.60 |
| | | | | | | | | |
| | | | | | | | | |
| | | - | | | | | | |
| TOTAL Evandit | | | - | | | | - | |
| TOTAL Expendit | lures | | | | | | | |
| a Gifts (Group) | | | | | | | | |
| Ordinarily gifts to individual | legislators must | not exceed \$25 | Gifts such as | key chains, | mugs, and | calendars giv | ven to Al | L members |
| of the House or Senate, the | T-1 | | | | | | | |
| roup it was given and the t | | | | received t | he gift, only | the name of | f the gro | up. |
| ransfer the total cost to the | | ty Report, sectio h employer prov | | Which ar | oun receive | d the gift? | Total | act of gift(s) |
| Describe the Birt(s) | escribe the gift(s) Which | | ided the gitt | oup receive | eceived the gift? Total cost of gift(s | | | |
| | | | | | | | | |
| | | | | | | | | * |
| 2. Participation in a Pa | nel or Speaki | ng Engageme | nt | | | | | |
| Report expenditures on a pa | articular person i | n the categories | listed below v | hen such e | expenditure | was for the | individu | al's |
| participation in a panel or sp | | | | | | | | |
| Recipient name and event | Meals & | Lodging | Travel | Gifts | | Scheduled entertain & other | | Total \$ |
| | beverages | | | | & otn | ier | | expended |
| | - | | | - | - | | | |
| | | | | | | | | |
| | | | | | | | | |
| 3. Subjects of Lobbying | g | | | | | | | |
| For each recipient identified | | | | | | | | |
| then the subject matter of t | he lobbying. Exa | ample: "Del. Joe | Jones – Health | Care" or " | House Finar | nce Committ | ee - Envi | ronment." |
| John Dovle - Healthcare | | | | | | | | |

Sammi Brown - Healthcare