## Received

DEC 142020

## WV Ethics Commissior

## West Virginia Ethics Commission Lobbyist Activity Report Form

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 $\quad$ No foxed copies |
| For office use only: |
| Postmark <br> Days late |


| 1. Name and contact information |  |
| :--- | :--- |
| Name James L. Fawcett | Phone 304-424-7716 |
| Business Address 614 Market Street | Business Email james.fawcett@highmark.com |
| $\quad$  <br> City, State Zip Parkersburg, WV 26101  |  |

2. Reporting period for which this activity report is being filed


| 3. List all employers/organizations that you represent as a lobbyist |  | Use additional reporting forms if necessary. |
| :--- | :--- | :--- |
| 1. Highmark West Virginia 4. 5. <br> 2. 6.  <br> 3.   |  |  |


| 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." |
| :--- |
| None |


| 5. Expenditures |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| If no expenditures, including campaign contributions, mark here: $\downarrow$ |  |  |  |  |  |  |  |  |
| If you spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following categories per each employer you represent. Complete and attach Schedule A to this report. |  |  |  |  |  |  |  |  |
| Expenditure Categories |  | Employer 1 | Employer 2 | Employer 3 | Employer 4 | Employer 5 | Employer 6 | Total Expended |
| A. | Meals and Beverages | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| B. | Lodging | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| C. | Advertising | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| D. | Travel | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| E. | Gifts | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| F. | Other Expenses | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| G. | Group Expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| H. | Campaign Contributions | LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. |  |  |  |  | $\sum$ | \$ |
| 1. | TOTAL of all expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5 G immediately above. Complete and attach a Schedule B for each event. |  |  |  |  |  |  |  |  |

