## West Virginia Ethics Commission Lobbyist Activity Report Form 2020-03

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

West Virginia Ethics Commission Attn: Lobtyist Ragistrar 210 Brooks St, Ste. 300 Charleston, WV 25301 304-558-0664 No foned caples For oplice use ondr: Pontmer $\qquad$ maced Pnow $\qquad$

| 2. Name and contect information |
| :--- |
| Name Wendel B. Tumer |
| Business Addrom 808 Greenbrier Street |
| Chy, state zip Charleston WV 25311 |

## 2. Reporting period for which thls activity report is being filied



| 3. Ust all employers/organizations that you represent as a lobbyist | Use additional reporting forms /f necossary. |
| :--- | :--- | :--- |
| 1. American Express Co. 4. 5. <br> 2. 6.  <br> 3.   |  |

## 4. Lobbyins activity summary - If there was no activity or expenditures, indlcate "nons."

## None

| 5. Expenditures |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| If no expendilures, including campalin contributions, mark here: $\triangle$ |  |  |  |  |  |  |  |  |
| 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 | Emplayer 5 | Employer 6 | Total Expended |
| A. | Meals and Beverages | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| B. | Lodiging | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| C. | Advertising | \$ | 5 | \$ | 5 | \$ | \$ | \$ |
| D. | Travel | 5 | S | \$ | \$ | \$ | \$ | \$ |
| E. | Gifts | \$ | \$ | 5 | \$ | 5 | \$ | \$ |
| F. | Other Expenses | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| G. | Group Expenditures | \$ | S | 5 | \$ | 5 | 5 | \$ |
| H. | Campaign Contributions | UST AMOUNT IN "TOTAL EXPENDED" COLUMN. |  |  |  |  |  | \$ |
| 1. | TOTAL of all expenditures | \$ | \$ | \$ | 5 | \$ | \$ | \$ |

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.

