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By WV Ethics Commission at 10:47 am, Feb 25, 2025

West Virginia Ethics Commission
Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: TURMAN MORTON, INC.

Address: P.O. Box 483, BARBOURVILLE, WV 25504

Name of Authorized Agent: BRIAN D. MORTON Address: SAME

Contract Number: 2016000957 Contract Description: CROOKED CREEK BR

Governmental agency awarding contract: WEST VIRGINIA DEPARTMENT OF TRANSPORTATION, DIVISION OF HIGHWAYS

Check here if this is a Supplemental Disclosure

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):

1. Subcontractors or other entities performing work or service under the Contract

Check here if none, otherwise list entity/individual names below.

HIGHWAY SAFETY, INC. P & G CONSTRUCTION, INC.
SHEPARD ENTERPRISES, INC. KELLY MARTIN LLC (dba MARTIN REINFORCING)
WEST VIRGINIA PAVING, INC.

2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)

Check here if none, otherwise list entity/individual names below.

BRAD TURMAN 50%
BRIAN MORTON 50%

3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)

Check here if none, otherwise list entity/individual names below.

Signature: [Signature] Date Signed: FEBRUARY 11, 2025

Notary Verification

State of WEST VIRGINIA, County of CABELL

I, Kathryn S. Booter, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.

Taken, sworn to and subscribed before me this 11th day of February, 25.

[Signature]
Notary Public's Signature

To be completed by State Agency:

Date Received by state agency: _____

Date submitted to Ethics Commission: _____

Governmental agency submitting Disclosure: _____

