

Received

SEP 15 2020

West Virginia Ethics Commission

WV Ethics Commission

# Lobbyist Activity Report Form

2020-02

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 \_\_\_\_\_

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

### 1. Name and contact information

Name MARK GOMEZ Phone 304-410-1982  
 Business Address 3500 Sherrinton Ave SE Business Email markgomez1111@gmail.com  
Suite 7, Charleston WV 25304  
 City, State Zip \_\_\_\_\_

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

Check	Report	Period	Due Date				
x	2020-2	5/1/20 - 8/31/20	9/15/2020				

### 3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

- None Due to Covid-19
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

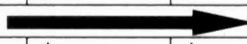
### 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

None Due to Covid-19

### 5. Expenditures

If no expenditures, including campaign contributions, mark here:

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. 						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$

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.