West Virginia Ethics Commission

Lobbyist Activity Report Form 2017-03

Received

JAN 16 2013

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. Name and contact information												
Name Elaine A. Harris							Phone	Phone (Office) 304-342-2023 (Cell) 304-541-7293				
Address Huntington Square, Suite 1212							-	Email eharris@cwa-union.org				
900 Lee Street												
city, State zip Charleston, WV 25301												
2. Reporting period for which this activity report is being filed												
Check		Period	_	Date								
Х	2017-3	9/1/17-12/31/17	1/15	5/2018	September 1	国际发生标识 的					-	
			-									
							第32日120日					
3. List all employers/organizations that you represent as a lobbyist												
1. Communications Workers of America, AFL-CIO												
West Virginia Troopers Association/CWA Local 2019												
36												
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."												
Budget - DMAPS & Overall Budget, Pay, PEIA Insurance, Telecom/Broadband, Staffing Shortages/Pay - Division of Corrections,												
Division of Juvenile Services & Regional Jail Employees, Longevity Pay, opposing abolishment of Civil Service Coverage for covered												
State Employees and all other matters affecting workers and retirees. DHHR - Funding CHIPS Coverage for eligible children in West Virginia.												
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			Emplo		Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total E	xpended	
A.	Meals and B	Beverages	\$	0.00	\$	\$	\$	\$	\$	\$		
В.	Lodging		\$	0.00	\$	\$	\$	\$	\$	\$		
C.	Advertising		\$	0.00	\$	\$	\$	\$	\$	\$		
D.	Travel		\$	0.00	\$	\$	\$	\$	\$	\$		
E.	Gifts		\$	0.00	\$	\$	\$	\$	\$	\$		
F.	Other Exper	nses	\$	0.00	\$	\$	\$	\$	\$	\$		
G.	Group Expe	nditures	\$	0.00	\$	\$	\$	\$	\$	\$		
Н.		ontributions	-	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.								
1.		l expenditures	\$	0.00	\$	\$	\$	\$	\$	\$	0.00	
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												

Lobbyist certification - Please read and sign below.

To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is