West Virginia Ethics Commission

attach a Schedule B for each event.

Received IN 13 2020 **Lobbyist Activity Report Form**

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

2019-03

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 _

| | Ron L. Brady | | | | Phone | 304-546-9485 | | |
|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------|---------------------------------------|
| Business Address USW Local 14614 510 Main Avenue | | | | | Business Email rbrady@usw14614.org | | | |
| Justin | | | | | asiness cinali | ,,, | | |
| C:4 (| State Zip Nitro, WV 25143 | | | | | | | |
| city, s | State Zip | | | | | | | |
| 2. F | Reporting period for which th | is activity repor | is being filed | | | | | |
| heck | | Due Date | | | | | | |
| x | 2019-3 9/1/19 - 12/31/ | 19 1/15/2020 | | | | | | |
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| | | | | | | | | |
| 3. L | List all employers/organization | ns that you repr | esent as a lobb | yist | U: | e additional rep | porting forms i | f necessary. |
| 1 | USW Local 14614 | | | | | | | |
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| 2 | 2 | | | 5 | | | | |
| 3 | 3, | | | 6 | | | | |
| | | | | | | | | |
| 4. L | obbying activity summary - I | there was no a | ctivity or eyner | ditures indicat | e "none " | | | |
| | | there was no a | ctivity of exper | iditures, maicat | e none. | | | |
| non | e | | | | | | | |
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| F | -vnenditures | | | | | | | |
| | Expenditures | nian contributio | ns mark hara | | | | | |
| f no e | expenditures, including camp | | | | diate family list | * | | he fellowing |
| f no e | expenditures, including camp spent money on any public o | ficial, employee | or member of | his or her immed | | the amounts sp | ent in each of t | he following |
| you atego | expenditures, including camp spent money on any public o ories per each employer you | fficial, employee epresent. Comp | or member of lete and attach | his or her immed Schedule A to t | his report. | | , | |
| f no e f you atego xper | expenditures, including camp spent money on any public o ories per each employer you r nditure Categories | fficial, employee epresent. Comp Employer 1 | or member of lete and attach Employer 2 | his or her immed Schedule A to t Employer 3 | his report. Employer 4 | Employer 5 | Employer 6 | Total Expende |
| f no e f you atego xper | spenditures, including camp spent money on any public o ories per each employer you n nditure Categories Meals and Beverages | fficial, employee epresent. Comp Employer 1 | or member of lete and attach Employer 2 \$ | his or her immed Schedule A to t Employer 3 | his report. Employer 4 \$ | Employer 5 | Employer 6 | Total Expende |
| f no e f you atego xper A. | expenditures, including camp spent money on any public o ories per each employer you n nditure Categories Meals and Beverages Lodging | fficial, employee epresent. Comp Employer 1 \$ \$ | or member of lete and attach Employer 2 \$ \$ | his or her immed Schedule A to t Employer 3 \$ \$ | Employer 4 \$ | Employer 5 \$ | Employer 6 \$ | Total Expende |
| f no e f you catego exper A. B. | expenditures, including camp spent money on any public o ories per each employer you n nditure Categories Meals and Beverages Lodging Advertising | fficial, employee epresent. Comp Employer 1 \$ \$ | or member of lete and attach Employer 2 \$ \$ | his or her immed Schedule A to t Employer 3 \$ \$ \$ | his report. Employer 4 \$ \$ \$ | Employer 5 \$ \$ \$ | Employer 6 \$ \$ \$ | Total Expender \$ \$ \$ |
| f no e f you catego Exper A. B. | expenditures, including camp spent money on any public o ories per each employer you n diture Categories Meals and Beverages Lodging Advertising Travel | ificial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ | or member of lete and attach Employer 2 \$ \$ \$ \$ \$ \$ | his or her immed Schedule A to t Employer 3 \$ \$ \$ \$ | Employer 4 \$ \$ \$ \$ \$ \$ | Employer 5 \$ \$ \$ \$ | Employer 6 \$ \$ \$ \$ | Total Expende \$ \$ \$ \$ |
| f no e f you atego xper A. B. | expenditures, including camp spent money on any public o ories per each employer you n diture Categories Meals and Beverages Lodging Advertising Travel Gifts | ificial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ | or member of lete and attach Employer 2 \$ \$ \$ \$ \$ | his or her immed Schedule A to t Employer 3 \$ \$ \$ \$ \$ | his report. Employer 4 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | Employer 5 \$ \$ \$ \$ \$ \$ \$ | Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ | S S S S S |
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