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WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

2020-01

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: Rec'd_ Postmark ____

Late reporting fine - \$10 per business day past the due date (\$250 maximum) Days late Fine								ne	
1. Name and contact information									
Name Timothy E. Huffman Phone 304-340-1301							301		
Busine	P. O. Box	Business Email tehuffman@jacksonkelly.com							
	104 2 11 .03 05.05 0								
City, State Zip CHARLESTON, WV 25322									
City, State Zip Oth (17220121									
2. Reporting period for which this activity report is being filed									
Check	Report Period	Due Date							
×	2020-1 1/1/20 - 4/30/20	5/15/2020							
3. Li	3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.								
Encova Insurance									
2. WV Workers' Compensation Association 5.									
36									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
5. Expenditures									
	xpenditures, including campa			The Party of the P					
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.									
	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
B.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising Travel	\$	\$	\$	\$	\$	\$	\$	
D.		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts Other Evpenses	\$	\$	\$	\$	\$	\$	\$	
G.	Other Expenses	\$	\$	\$	\$	\$	\$	Ś	
Н.	Group Expenditures			PENDED" COLU	1	3	13	\$300.00	
I.	Campaign Contributions TOTAL of all expenditures	\$	\$	S COLU	Ś	\$	(\$300.00	
			*	*	· · ·		nediately above		
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.									