## Received

## APR 28 2020

West Virginia Ethics Commission

## Lobbyist Activity Report Form

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664 No faxed co

	business day p				Postmark Days late		
Name and contact information	tion						
Name Karan Ireland				Phone 304	1-356-8774		
Business Address 1 Morris Street, #802 Business Email						noil norm	
			Bus	iness Email Naid	n.netand@gn	iaii.com	
City, State Zip Charleston, W	V 25301						
2. Reporting period for which t	his activity rene	ort is being filed					
check Report Period	Due Dat	e selled	liki tälläsän maassa t	FAMILY			
x 2020-1 1/1/20 - 4/30/2	0 5/15/20	ASSESSMENT AND ADDRESS OF THE			+		
					1		-
		<b>的问题</b> 的任务					_
3. List all employers/organization	ons that you rep	present as a lobb	yist	Use	additional repo	rting forms if -	
1. WV Environmental	Council						
2							
2			5				
3			6				
Lobbying activity summary - I	f there was no	activity or exper	nditures, indicate	e "none."			
					akers No.e	vnenditur	e outinge
egislative session cove					akers. No e	expenditure	es, outings.
. Lobbying activity summary - I Legislative session cove Gift to					akers. No e	expenditure	es, outings.
egislative session cove					akers. No e	expenditure	es, outings.
egislative session cove					akers. No e	expenditure	es, outings.
Legislative session cover Gift to Expenditures	erage. Visit	s, meetings	s, calls, ema		akers. No e	expenditure	es, outings.
Legislative session coveragift to  Expenditures no expenditures, including campo	erage. Visit	s, meetings	s, calls, ema	ails to lawm			
Legislative session coveragift to  Expenditures no expenditures, including campo	erage. Visit	ons, mark here:	his or her imme	ails to lawm			
Expenditures no expenditures, including campo you spent money on any public of	aign contribution	ons, mark here:	his or her immer	diate family, list	the amounts spo	ent in each of t	he following
Expenditures no expenditures, including campo you spent money on any public of itegories per each employer you re	aign contribution  fficial, employee epresent. Complement Compleme	ons, mark here: e or member of plete and attach Employer 2	his or her immen Schedule A to t	diate family, list his report.	the amounts spo	ent in each of t	he following Total Expende
Expenditures no expenditures, including campo you spent money on any public of ategories per each employer you re expenditure Categories Meals and Beverages	aign contribution  fficial, employee epresent. Complements	ons, mark here: e or member of plete and attach Employer 2	his or her immed Schedule A to t Employer 3	diate family, list his report.  Employer 4	the amounts spo Employer 5	ent in each of t Employer 6	he following  Total Expende
Expenditures no expenditures, including campo you spent money on any public of itegories per each employer you re expenditure Categories Meals and Beverages Lodging	aign contribution  fficial, employee epresent. Com Employer 1 \$	ons, mark here: or member of plete and attach Employer 2	his or her immed Schedule A to t Employer 3	diate family, list his report.  Employer 4  \$	the amounts spe Employer 5 \$	ent in each of to	he following Total Expende
Expenditures no expenditures, including campo you spent money on any public of tegories per each employer you re expenditure Categories Meals and Beverages Lodging Advertising	aign contribution  fficial, employee epresent. Complement of the c	ons, mark here: or member of plete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$	diate family, list his report.  Employer 4  \$ \$	Employer 5 \$ \$	ent in each of t  Employer 6  \$  \$	he following  Total Expende  \$
Expenditures no expenditures, including campo you spent money on any public of tegories per each employer you re expenditure Categories Meals and Beverages Lodging Advertising Travel	aign contribution  fficial, employee epresent. Complement of the contribution of the c	ons, mark here: or member of plete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to to Employer 3 \$ \$ \$	diate family, list his report.  Employer 4  \$ \$ \$	Employer 5 \$ \$ \$	ent in each of to	he following  Total Expende  \$ \$ \$
Expenditures no expenditures, including campo you spent money on any public of tegories per each employer you re expenditure Categories Meals and Beverages Lodging Advertising Travel Gifts	aign contribution  fficial, employee epresent. Complement of the c	ons, mark here: or member of plete and attach Employer 2 \$ \$ \$ \$	his or her immed Schedule A to to Employer 3 \$ \$ \$	diate family, list his report.  Employer 4  \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$	he following  Total Expende  \$ \$ \$ \$ \$
Expenditures no expenditures, including campo you spent money on any public of tegories per each employer you re expenditure Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses	aign contribution  fficial, employer 1  \$ \$ \$ \$ \$ \$	ons, mark here: or member of plete and attach Employer 2 \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$	diate family, list his report.  Employer 4  \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$
Expenditures no expenditures, including campo you spent money on any public of tegories per each employer you re xpenditure Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses Group Expenditures	aign contribution  fficial, employer 1  \$ \$ \$ \$ \$ \$ \$	ons, mark here: or member of plete and attach Employer 2 \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$	diate family, list his report.  Employer 4  \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$	he following  Total Expende  \$ \$ \$ \$ \$ \$ \$
Expenditures no expenditures, including campo you spent money on any public of tegories per each employer you re expenditure Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses	aign contribution fficial, employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ons, mark here: or member of plete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	his or her immed Schedule A to to Employer 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	diate family, list his report.  Employer 4  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$	Total Expende  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$