## SEP 02 2020

## WV Ethics Commission

## West Virginia Ethics Commission

## **Lobbyist Activity Report Form**

2020-02

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

For office use only:

Postmark \_\_\_\_ Days late \_\_\_ No faxed copies

\_\_\_\_ Rec'd\_\_\_\_\_

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

1. Name and contact i	nformation								
Name David Efaw				,	Phone 304-346-1367				
Business Address 600 Leon Sullivan Way					Business Email daveefaw@wvsbt.org				
Business Address					Business Email daysolong				
Charles	4 MAI 2520	4				***			
City, State Zip Charles	ton, WV 2530	1							
2. Reporting period fo			is being filed				,	· ·	
Check Report Perior		Due Date							
x 2020-2 5/1/20	-8/31/20 9	9/15/2020					-		
	-						+		
				Distance with					
3. List all employers/organizations that you represent as a lobbyist								f necessary.	
1. WV State B	uilding Trade	es		4					
3				6					
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
Labor and Construction Issues									
					-				
5. Expenditures									
if no expenditures, includ	tina campaian ca	ntrihutlan	s mark here:					***************************************	
If you spent money on an					diate family list	the amounts sn	ent in each of t	he following	
categories per each empl						erre arrivarres ap	ene ni ozori or i		
Expenditure Categories	Fmr	oloyer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A. Meals and Bevera		,	\$	\$	\$	\$	\$	\$	
Meals and Bevera     Lodging		,	\$	\$	\$	\$	\$	\$	
	ages \$		\$	\$		-	\$	\$	
B. Lodging C. Advertising D. Travel	ages \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$	\$ \$	\$ \$	\$ \$	\$ \$	\$ \$ \$	
B. Lodging C. Advertising D. Travel E. Gifts	ages \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$	\$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$	\$ \$ \$	\$ \$ \$ \$	
B. Lodging C. Advertising D. Travel E. Gifts F. Other Expenses	ages \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$	\$ \$ \$ \$	\$ \$ \$ \$	\$ \$ \$	\$ \$ \$ \$	\$ \$ \$ \$ \$	
B. Lodging C. Advertising D. Travel E. Gifts F. Other Expenses G. Group Expenditu	ages \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$	\$ \$ \$	\$ \$ \$ \$ \$	
B. Lodging C. Advertising D. Travel E. Gifts F. Other Expenses	ages \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$	\$ \$ \$	\$ \$ \$ \$	\$ \$ \$ \$ \$	

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.