West Virginia Ethics Commission

Lobbyist Activity Report Form

2020-02

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 No faxed copies

304-558-0664 For office use only:

Postmark_ Rec'd_ Days late_ Fine_

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

1. Name and contact information										
Name										
						Business Email jeff.fritz@chemours.com				
Business Email 19										
Fort Wayne IN 46935										
City, State Zip Fort Wayne, IN 46835										
2. Reporting period for which this activity report is being filed										
Check	+		Due Date			13/11/19				
X	2020-2	5/1/20 - 8/31/20	9/15/2020	2						
	-			200,000,000						
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.										
1. The Chemours Company										
2.	2 5									
3 6										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
Business Taxes; Economic Development; Water Quality Standards										
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 Employer 1 Employer 2 Employer 3 Employer 4 Employer 5 Employer 6 Total Expended										
	Meals and Beverages		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A. B.		u beverages	\$	\$	\$	\$	\$	\$	\$	
C.	Lodging Advertising	0.0	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	ig.	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Exp	nenses	\$	\$	\$	Ś	Ś	\$	\$	
G.			\$	\$	\$	4	\$	\$	\$	
Н.	Group Expenditures \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									
1.		all expenditures	\$	S	\$	\$	Ś	Ś	\$	
	If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and									
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attach a Schedule B for each event.