

Received  
 DEC 16 2020  
 WV Ethics Commission

**West Virginia Ethics Commission**  
**Lobbyist Activity Report Form**  
 2020-03

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 \_\_\_\_\_ Fine \_\_\_\_\_

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

**1. Name and contact information**

Name Ronald N Walters Phone 304-542-1572  
 Business Address PO Box 3665 Business Email rwalters5000@gmail.com  
 City, State Zip Charleston WV 25336

**2. Reporting period for which this activity report is being filed**

Check	Report	Period	Due Date				
x	2020-3	9/1/20 - 12/31/20	1/15/2021				

**3. List all employers/organizations that you represent as a lobbyist** *Use additional reporting forms if necessary.*

1. Nation Youth Science Foundation 4. \_\_\_\_\_  
 2. NA 5. \_\_\_\_\_  
 3. NA 6. \_\_\_\_\_

**4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."**

Working in West Virginia Based STEM Education programs for West Virginia Students only in both Middle School and High School

**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
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	<b>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</b>						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$ <u>0</u>

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.

*see back page for signature*