## Received

JAN 07 2021

## 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
Days late

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

Name	Joe Whi	te				Phone S	304-346-3544		
Business Address 1610 Washington Street East						Business Email jwhite@wvsspa.org			
ousme:	s Address					isniess Lilian			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4.4						
City, St	ate Zip 🦰	harleston, WV 253	11						
						Annual Salata	.j-1 pp.		
2. Re	porting pe	eriod for which this a	tivity report	is being filed					
Check	Report		Due Date						
· X	2020-3	9/1/20 - 12/31/20	1/15/2021						
			1						
3. Lis	t all empl	oyers/organizations t	hat you repr	esent as a lobb	yist	Use	e additional rep	orting forms i	f necessary.
	West Vii	rginia School Serv	ice Person	nel Associat	ion ,				
1.									
2.					5				
3.					6				
	hhidan ad	:		tiuitu en eusen	diturne indicat	"mana"			
4. Lo		ivity summary - If the	ere was no ac	tivity or exper	nditures, indicat	e "none."			
		ivity summary - If the	ere was no ac	tivity or exper	nditures, indicat	e "none."			
l. Lo		ivity summary - If the	ere was no ad	tivity or exper	aditures, indicat	e "none."			
l. Lo		ivity summary - If the	ere was no ad	tivity or exper	aditures, indicat	e "none."			
l. Lo		ivity summary - If the	ere was no ad	tivity or exper	nditures, indicat	e "none."			
. Lo			ere was no ad	tivity or exper	nditures, indicat	e "none."			
i. Lo	penditure	5				e "none."			
i. Lo none	penditure:	s s, including campaigr	o contribution	ns, mark here:	<b>√</b>		the amounts sp	ent in each of t	the following
i. Ex	penditure: penditure: pent mone	s s, <i>including campaigr</i> ey on any public offici	<i>contributio</i> al, employee	ns, mark here: or member of	√ his or her Imme	diate family, list t	the amounts sp	ent in each of t	the following
1. Lo  none  5. Ex  f no ex  f you so	<b>penditure</b> : penditure: pent mone ies per ear	s s, including campaigr ey on any public offici ch employer you repro	<i>contributio</i> al, employee	ns, mark here: or member of	√ his or her Imme	diate family, list t	the amounts sp	ent in each of t	the following
1. Lo none  5. Ex f no ex f you so	penditure: penditure pent mone ies per ea liture Cate	s s, <i>including campaigr</i> ey on any public offici ch employer you repro gories	a contribution al, employee esent. Comp Employer 1	ns, mark here: or member of lete and attach	his or her imme Schedule A to t	diate family, list t his report.			
4. Lo  none  5. Ex  f no ex  f you s  categor  Expend	penditure: penditure pent mone ies per ea liture Cate	s s, including campaign ey on any public officie ch employer you repres gories d Beverages	a contribution al, employee esent. Comp Employer 1	es, mark here: or member of lete and attach Employer 2	his or her immer Schedule A to t Employer 3	diate family, list t his report. Employer 4	Employer 5	Employer 6	Total Expende
5. Ex f no ex f you s ategor Expend A. B.	penditure: penditure pent mone ies per ea liture Cate Meals and	s s, Including campaigr ey on any public officie ch employer you repre gories d Beverages	a contribution al, employee esent. Comp Employer 1	es, mark here: or member of lete and attach Employer 2 \$	his or her immer	diate family, list this report.  Employer 4	Employer 5	Employer 6	Total Expende
5. Exfino exfiyous categoric Expending.	penditure: pent mone ies per ear liture Cate; Meals and	s, <i>including campaigr</i> ey on any public officie ch employer you repres gories E	a contribution al, employee esent. Comp employer 1	os, mark here: or member of lete and attach Employer 2 \$ \$	his or her immed Schedule A to t Employer 3 \$	diate family, list this report.  Employer 4  \$	Employer 5 \$	Employer 6	Total Expende
f you stategore Expended.	penditure: pent mone ies per each liture Cate; Meals and Lodging Advertisin	s s, including campaigr ey on any public officia ch employer you repro gories d Beverages	a contribution al, employee esent. Comp employer 1	os, mark here: or member of ete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$	diate family, list this report.  Employer 4  \$ \$	Employer 5 \$ \$ \$	Employer 6 \$ \$	Total Expende \$ \$ \$
i. Lo none  i. Ex f no ex f you s categor expend A. B. C. D. E.	penditure: pent mone ies per eac liture Cate Meals and Lodging Advertisir	s s, including campaign ey on any public officie th employer you repro- gories E d Beverages S	a contribution al, employee esent. Comp Employer 1	os, mark here: or member of lete and attach Employer 2 \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$ \$	diate family, list this report.  Employer 4  \$ \$ \$ \$	Employer 5 \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$
5. Extf no extf you stategore Expended A. B. C. D. E. F.	penditure: pent mone ies per ear liture Cate Meals and Lodging Advertisir Travel Gifts Other Exp	s s, including campaign ey on any public officie ch employer you repri gories E d Beverages S	a contribution al, employee esent. Comp Employer 1	ns, mark here: or member of lete and attach Employer 2 \$ \$ \$ \$ \$	his or her immer Schedule A to t Employer 3 \$ \$ \$ \$ \$	diate family, list this report.  Employer 4  \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$
4. Lo none  5. Ex f no ex if you s categor	penditure: pent mone ies per each liture Cate Meals and Lodging Advertisin Travel Gifts Other Exp	s s, including campaign ey on any public officie th employer you repri gories E d Beverages S eng S penses S penditures S	a contribution al, employee esent. Comp employer 1	es, mark here: or member of lete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	his or her immer Schedule A to t Employer 3 \$ \$ \$ \$ \$ \$	diate family, list this report.  Employer 4  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$