## **West Virginia Ethics Commission**

## **Lobbyist Activity Report Form**

2021-01

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

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 \_\_\_\_

1. Name and contact information										
Name Eldon A. Callen							Phone (304)290-7142			
Address 265 Spruce Street							Email eldon@morgantownpartnership.com			
Suite 100										
City, State Zip Morgantown, WV 26505										
2. Reporting period for which this activity report is being filed										
2. Reporting period for which this activity report is being filed  Check Report Period Due Date										
X	-	1/1/21 - 4/30/21	5/17/21							
	202101	1/1/21 4/30/21					1			
2 List all ample your formations that we require the built the different section of the section										
3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.										
1. Morgantown Area Partnership 4.										
2 S										
3										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
None										
5. E	vnandituras									
5. Expenditures  If no expenditures, including campaign contributions, mark here:										
	-	y on any public off				liato family list	the amounts on	ent in each of t	he following	
		ch employer you re					the amounts sp	ent in each of t	tie tollowing	
Expenditure Categories			Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
Α.		Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging		S	\$	\$	\$	S	S	S	
C.	Advertising		\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses		\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures		\$	\$	\$	\$	\$	\$	\$	
Н.	Campaign	Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$						\$	
l.	TOTAL of all expenditures		\$	\$	\$	\$	\$	\$	\$0.00	
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.										