## MAY 03 2021

## **W** Ethics Commission

**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 Fine Fine

Name Mary K. Prim						Phono	Phone 304-342-6107			
Address PO Box 297										
Addre	ss PO BOX	(291				Email mary@maryprim.com				
ity S	tate 7in Sc	cott Depot, WV 25	560							
sity, s	tate zip _									
. D		riad for which this	a attribu samani	tic boing filed		****				
. R Check	Report	riod for which this Period	Due Date	is being med	aranda on an galanina dalah kanada da		1		1	
X		1/1/21 - 4/30/21	5/17/21	4						
	1021 01	1/1/21 4/30/21		- Innet		18 18 18				
					S					
					•					
		yers/organization			yist	Us	e additional rep	porting forms i	f necessary.	
1	Constructe	ors Labor Council	of West Virgini	a, Inc.	4					
2					-					
4					5					
3					6					
	obbying act	ivity summary - If t	here was no a	ctivity or exper	nditures, indicat	e "none."				
e. Li				ourself or order						
None	Э									
None	e expenditures		an contributio	ns mark hara						
None	e xpenditures xpenditures	; ;, including campai				diata family, list	the amounts on	ent in each of	the following	
None  E fno e	xpenditures xpenditures xpent mone	i, including campai y on any public off	cial, employee	or member of	his or her imme		the amounts sp	ent in each of t	the following	
None Fyou atego	xpenditures xpenditures spent mone ories per eac	i, <i>incl<b>uding campa</b>i</i> y on any public off h employer you re	cial, employee present. Comp	or member of lete and attach	his or her immed Schedule A to t	his report.		1	_	
None  i. E  f no e  f you  atego  xpen	xpenditures xpenditures spent mone ories per eac diture Categ	i, including campai y on any public off th employer you re gories	cial, employee present. Comp Employer 1	or member of plete and attach Employer 2	his or her immed Schedule A to t Employer 3	his report. Employer 4	Employer 5	Employer 6	Total Expende	
None  i. E f no e f you tatego expen	expenditures  xpenditures  xpent mone  spent mone  diture Cate  Meals and	i, <i>incl<b>uding campa</b>i</i> y on any public off h employer you re	cial, employee present. Comp Employer 1 \$	or member of plete and attach Employer 2	his or her immed Schedule A to t Employer 3	his report.  Employer 4  \$	Employer 5	Employer 6	Total Expende	
None  f no e f you catego Expen A. 3.	xpenditures xpenditures spent mone ories per eac diture Cate Meals and Lodging	i, including campai y on any public off h employer you re gories I Beverages	cial, employee present. Comp Employer 1 \$	or member of plete and attach Employer 2 \$ \$	his or her immer Schedule A to t Employer 3 \$ \$	his report.  Employer 4  \$ \$	Employer 5	Employer 6 \$ \$	Total Expende	
None  f no e  f you  atego  xpen  A.  3.	xpenditures xpenditures spent mone ories per eac diture Categ Meals and Lodging Advertisin	i, including campai y on any public off h employer you re gories I Beverages	cial, employee oresent. Comp Employer 1 \$ \$	or member of plete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$	his report.  Employer 4  \$ \$ \$	Employer 5 \$ \$ \$	Employer 6 \$ \$ \$	Total Expende \$ \$ \$	
None  i. E fnoe fyou catego expen A. B. C.	xpenditures xpenditures spent mone ries per eac diture Categ Meals and Lodging Advertisin Travel	i, including campai y on any public off h employer you re gories I Beverages	cial, employee present. Comp Employer 1 \$ \$ \$	or member of plete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$	his report.  Employer 4  \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$	Employer 6 \$ \$ \$ \$	Total Expender \$ \$ \$ \$ \$	
None  ii. E  fno e  fyou  atego  Expen  A.  C.  D.	xpenditures xpenditures spent mone ories per eac diture Cate Meals and Lodging Advertisin Travel Gifts	i, including campai y on any public off th employer you re gories I Beverages	cial, employee or esent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$	or member of plete and attach Employer 2 \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$	his report.  Employer 4  \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$	
None  Froe effour attention and a control of the co	xpenditures xpenditures spent mone ories per eac diture Cate Meals and Lodging Advertisin Travel Gifts Other Exp	i, including campai y on any public off th employer you re gories I Beverages g	cial, employee oresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$	or member of blete and attach Employer 2 \$ \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$ \$ \$	his report.  Employer 4  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
None  f you catego Expen A. B. C. D. E. F. G.	xpenditures xpenditures xpenditures spent mone ories per eac diture Cate Meals and Lodging Advertisin Travel Gifts Other Exp Group Exp	is, including campai y on any public off the employer you re gories I Beverages g enses penditures	cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$ \$	or member of plete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$ \$ \$ \$	his report.  Employer 4  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$	S S S S S S S S S S S S S S S S S S S	
None  i. E  froe  fyou  catego  Expen  A.  C.  D.  E.  F.	xpenditures xpenditures spent mone ories per eac diture Cate Meals and Lodging Advertisin Travel Gifts Other Exp Group Exp Campaign	i, including campai y on any public off th employer you re gories I Beverages g	cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$ \$	or member of plete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$ \$ \$	his report.  Employer 4  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	