## JAN 05 2022

## WV Ethics Commission

**West Virginia Ethics Commission** 

## **Lobbyist Activity Report Form**

2021-03

West Virginia Ethics Commission
Attn: Lobbyist Registrar
210 Brooks St., Ste. 300
Charleston, WV 25301
304-558-0664
For office use only:
Postmark
Days late
Fine

|    | 3  |  |  |  |  |  |
|----|--|--|--|--|--|--|
| 4. | Lobbying activity summary - If there was no activity or expenditures, indicate "none." |  |  |  |  |  |
|    | None   |  |  |  |  |  |
|    |  |  |  |  |  |  |
|    |  |  |  |  |  |  |

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       | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| В.                     | Lodging                   | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| C.                     | Advertising               | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| D.                     | Travel                    | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| E.                     | Gifts                     | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| F.                     | Other Expenses            | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| G.                     | Group Expenditures        | \$                                      | \$         | \$         | \$         | \$         | \$         | \$             |
| H.                     | Campaign Contributions    | LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. |            |            |            |            |            | \$             |
| 1.                     | TOTAL of all expenditures | \$                                      | \$         | \$         | \$         | \$         | \$         | \$ 0           |

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.