## **RECEIVED**

**West Virginia Ethics Commission** 

By Ethics Commission at 10:19 am, May 11, 2022

## **Lobbyist Activity Report Form**

2022-01

Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664

For office use only: Postmark \_\_\_\_

Days late \_

No faxed copies

Rec'd

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

1. Name and contact information								
Name Nancy J. Egan						43-441-4174		
Address 8700 W. Bryn Mawr Ave., Ste. 1200s Email nancy.egan@apci.org								ci ora
Address Of CO VV. Digit Mavvi / (VC., Otc. 12005 Email Harroy.ogail@apol.org								
City, State Zip Chicago, IL 60631								
2. Reporting period for which this activity report is being filed								
Check		Due Date	is semigrined					
х	2022-1 1/1/22-4/30/22	5/16/22	-					
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		-					
		- 414						<b>6</b>
3. List all employers/organizations that you represent as a lobbyist								
1. AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION 4.								
2 5								
3 6								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
SB1, SB7, SB11, SB25, SB420, SB534, SB572, SB671								
HB2170, HB2531, HB2740, HB4296, HB4394, HB4560, HB4787								
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.								
	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.	Meals and Beverages	\$ <b>0</b>	\$	\$	\$	\$	\$	\$ <b>0</b>
В.	Lodging	\$ 0	\$	\$	\$	\$	\$	\$ 0
C.	Advertising	\$ <b>0</b>	\$	\$	\$	\$	\$	\$ 0
D.	Travel	\$ <b>0</b>	\$	\$	\$	\$	\$	\$ <b>0</b>
E.	Gifts	\$ 0	\$	\$	\$	\$	\$	\$ <b>0</b> \$ <b>0</b>
F.	Other Expenses	\$ <b>0</b>	\$	\$	, T	т	т	\$ <b>0</b>
G.	Group Expenditures	\$0	> T.IN "TOTAL 5"	>   DENDED" CO: : :	\$	\$	\$	·
Н.	Campaign Contributions	\$ 0		PENDED" COLU	1	\$	ć	\$ 0 \$ 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.								
attach a Schedule B for each event.								