RECEIVED

By Ethics Commission at 10:19 am, May 13, 2022
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_

No faxed copies

Rec'd

Fine

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

Lobbyist Activity Report Form

West Virginia Ethics Commission

2022-01

Name and contact information	1						
Name Jackie Lozano				Phone 9196728020			
Address 1 <u>614 Kanawha Blvd East</u>				Email jlozano@outlook.com			
Address 1014 Italiawila Divu Last				Email NOZATIO (COUTION CONT			
City, State Zip Charleston, WV 25311							
2. Reporting period for which this activity report is being filed							
Check Report Period	Due Date						
x 2022-1 1/1/22-4/30/22	5/16/22						
		_					
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.							
American Civil Liberties Union of W/V							
1. American Civil Liberties Officin of VVV 4.							
2 5							
3 6							
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."							
To bodying activity summary - it there was no activity of experiments, indicate 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 r	epresent. Comp	lete and attach	Schedule A to th	nis report.			T
Expenditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	S TIN "TOTAL EX	\$ KPENDED" COLU	\$	\$	\$	\$
H. Campaign Contributions	+ -	ii in "IOIALEX S	S S	Ś	Ś	ć	\$
I. TOTAL of all expenditures	\$		•	•		odiatok abov	Complete and
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.							