## **West Virginia Ethics Commission**

## **Lobbyist Activity Report Form**

2022-01

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

Postmark \_\_\_\_

Days late \_

304-558-0664 No faxed copies For office use only:

Rec'd\_

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

1. Name and contact information												
Name Nathan Trail							Phone (202) 422-3175					
Address 1101 16th Street							Email nathan.trail@supernal.aero					
Address 1 10 1 10 11 0 11 0 11 0 11 0 11 0 1											i.acio	
City, S	tate Zip Wa	ashington, D0		RECEIVED								
	_											
2. R	eporting pe	riod for which this	activity report	t is being filed		By Ethics Commission at 10:05 am, May 06, 2022						
Check Report Period			Due Date									
х	2022-1	1/1/22-4/30/22	5/16/22									
3. Li	3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.											
	Supernal											
1.	<u>. Supernal</u> 4											
2.	2 5											
36												
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."												
<u>Transportation</u>												
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		3 Emplo	oyer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and	l Beverages	\$	\$	\$		\$		\$	\$	\$	
B.	Lodging		\$	\$	\$		\$		\$	\$	\$	
C.	Advertisin	g	\$	\$	\$		\$		\$	\$	\$	
D.	Travel		\$	\$	\$		\$		\$	\$	\$	
E.	Gifts		\$	\$	\$		\$		\$	\$	\$	
F.	Other Exp		\$	\$	\$		\$		\$	\$	\$	
G.	Group Exp		\$	\$	\$		\$		\$	\$	\$	
H.		Contributions	LIST AMOUNT IN "TOTAL EXPENDED								\$	
l.		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.												
attach	a scriedule	d for each event.										