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By Ethics Commission at 1:31 pm, Sep 15, 2022

West Virginia Ethics Commission

Lobbyist Activity Report Form

2022-02

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

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

1. Name and contact information										
Name Caleb B. David						Phone (304) 345-1400				
Address 1411 Virginia Street, East						-	Email cdavid@shumanlaw.com			
Suite 200										
City, State Zip Charleston, WV 25301										
City, state zip										
2. Reporting period for which this activity report is being filed										
				t is being tiled						
Check	Report	Period 5/1/22-8/31/22	9/15/22				-			
X	2022-2	3/1/22-0/31/22	9/13/22					-		
	1									
3. List all employers/organizations that you represent as a lobbyist										
1. Wetzel County Assessor's Office										
2 5										
3 6										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
Meeting with legislators regarding legislation involving county government and taxation										
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	
Α.	Meals and Beverages		\$	Ś	S	S	\$	\$	\$	
В.	Lodging		\$	\$	Ś	\$	\$	\$	\$	
C.	Advertising		\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses		\$	\$	s	s	\$	\$	\$	
G.	Group Expenditures \$ \$ \$		\$	\$	\$	\$				
Н.	Campaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" CO			<u> </u>	MN.	*		\$		
le le		II expenditures	\$	\$	\$	\$	\$	\$	\$	
				or shared expe	nses, list the tot	al expended in c	ategory 5G imn	ediately above	. 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.										