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By Ethics Commission at 12:45 pm, Aug 23, 2022

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 304-558-0664

For office use only: Postmark No faxed copies

Rec'd_

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

rine 320 per business duy past the due date (\$250 maximum)										
1. Name and contact information										
Name David Zielonka						Phone	Phone (202) 981-3786			
Address 1601 2nd Street							Email zielonka.david@gmail.com			
EmailEmail										
City.	City, State Zip Charleston, WV 25387									
2. Reporting period for which this activity report is being filed										
Check Report Period Due Date										
	2022-1	1/1/22-4/30/22	5/16/22							
х	2022-2	05/01/22-8/31/22	09/15/22	and the second		4 A Company		 		
			07/15/22	14-14-14-14		New 10 19 19 19 19 19 19 19 19 19 19 19 19 19		<u> </u>		
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary										
	Use additional reporting forms if necessary. Alzheimer's Association									
1. Alzheimer's Association 4.										
2	2 5									
3										
6										
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 offic	ial, employee	or member of	his or her immed	diate family, list	the amounts sp	ent in each of t	the following	
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 Categ	and the second s	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A	Meals and	- Indiana - Control - Cont	\$	\$	\$	\$	\$	\$	\$	
B.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertising		\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expe	enses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expe		\$	\$	\$	\$	\$	\$	\$	
Н.		ampaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.								
I.	TOTAL of a	Il expenditures	\$	\$	Ś	\$	Ś	Ś	A	
If you s	sponsored or	contributed to any	group event	or shared expe	nses, list the tota	al expended in c	ategory 5G imm	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.										