West Virginia Ethics Commission

Lobbyist Activity Report Form

2022-03

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664 For office use only:

Rec'd

Postmark .

Days late

No faxed copies

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

1. N	ame and contact information									
NameJill Rice					Phone 304-225-1430					
Address 215 Don Knotts Blvd.					Email jill.rice@dinsmore.com					
Addre	Suite 310				Ciriali <u>J.</u>					
		444 0000								
City, S	tate Zip Morgantown,	WV 2650								
2. R	eporting period for which this	activity repor	t is being filed							
Check	Report Period	Due Date								
х	2022-3 9/1/22-12/31/22	1/17/23	fem finalesi							
			52.7							
					1					
3. L	ist all employers/organization	s that you rep	esent as a lobb	yist	Us	e additional rep	orting forms ij	necessary.		
	West Virginia Insura				portunity W	est Virginia	, Inc.			
					RELX, Inc.					
_	Elevance Health & it									
3.	West Virginia Secondary S	chool Activitie	s Commission	6. Desilertrac	k Registration and Titling Solution	ns, Inc. / Dealertrack Colleteral I	fanagement,Service, Inc.			
4. L	obbying activity summary - If	there was no a	ctivity or exper	ditures, indicat	e "none."			111111111111111111111111111111111111111		
						condant co	hools: Div	oreity:		
insu	rance; Medicaid and	nealthcare	e, Extra cui	ricular acti	villes for se	condary sc	HOOIS, DIV	ersity,		
Info	rmation and technolo	gy								
5. E	xpenditures									
	xpenditures, including campa									
	spent money on any public off					the amounts sp	ent in each of t	he following		
catego	ories per each employer you re	present. Comp	lete and attach							
Expen	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended		
A.	Meals and Beverages	\$ 48.95	\$	\$	\$	\$	\$	\$ 48.95		
B.	Lodging	\$278.00	\$	\$	\$	\$	\$	\$278.00		
C.	Advertising	\$	\$	\$	\$	\$	\$	\$		
D.	Travel	\$	\$	\$	\$	\$	\$	\$		
Ε.	Gifts	\$	\$	\$	\$	\$	\$	\$		
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$		
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$		
Н.	Campaign Contributions			(PENDED" COLU		A CONTRACTOR OF THE PARTY OF TH		\$3,500		
l.	TOTAL of all expenditures	\$326.95	\$	\$	\$	\$	\$	\$3,826.95		
	sponsored or contributed to a a Schedule B for each event.	ny group eveni	or snared expe	nses, list the tot	ai expended in c	ategory 50 min	rediately above	e. Complete and		

West Virginia Ethics Commission

Lobbyist Activity Report Form

2022-03

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

304-558-0664 For office use only:

No faxed copies

		1								
NameJill Rice						Phone304-225-1430				
Address 215 Don Knotts Blvd.										
Suite 310					Email					
City, Sta	te Zip Morgantown,	WV 26501								
	porting period for which thi		is being filed							
Check	Report Period	Due Date	4.5							
X	2022-3 9/1/22-12/31/2	2 1/17/23								
		Part								
3. List	t all employers/organization	is that you repr	esent as a lobb	yist	Us	e additional rep	porting forms i	f necessary.		
1.	ADP			4.				7		
	Pierpont Community	v & Techni	cal College							
2	TOTPOTIC CONTINUATION	,	- Conoge	<u> </u>						
3				6						
					_ 					
4. Lot	bying activity summary - If	there was no a	ctivity or exper	ditures, indicate	e "none."					
rayit	oll and Human Reso	ources issu	es, nigher	Education						
								·		
. Exp	penditures									
	penditures penditures, including campa	ign contributio	ns, mark here:					·		
f no exp					liate family, list	the amounts sp	ent in each of t	he following		
f no exp f you sp categori	penditures, including campa pent money on any public of es per each employer you re	ficial, employee	or member of l	his or her immed		the amounts sp	ent in each of t	he following		
f no exp f you sp categori	penditures, including campa pent money on any public of	ficial, employee	or member of l	his or her immed		the amounts sp	ent in each of t	he following Total Expended		
f no exp f you sp categori Expendi	penditures, including campa pent money on any public of es per each employer you re	ficial, employee epresent. Comp Employer 1 \$	or member of l	his or her immed Schedule A to t	Employer 4		Employer 6			
f no exp f you sp categori Expendi A. B.	penditures, including campa cent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging	ficial, employee epresent. Comp Employer 1 \$	or member of lelete and attach Employer 2 \$	his or her immed Schedule A to t Employer 3 \$	Employer 4 \$ \$	Employer 5 \$	Employer 6	Total Expended		
f no exp f you sp categori Expendi A. B.	penditures, including campa cent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging Advertising	ficial, employee epresent. Comp Employer 1 \$ \$ \$	or member of lelete and attach Employer 2 \$ \$ \$	schedule A to the Employer 3 \$ \$ \$ \$	Employer 4 \$ \$ \$	Employer 5 \$ \$ \$	Employer 6 \$ \$ \$	Total Expended \$ 0.00 \$ 0.00 \$ 0.00		
f no exp f you sp categori Expendi A. B. C.	penditures, including campa pent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging Advertising	ficial, employee expresent. Comp Employer 1 \$ \$ \$ \$ \$	or member of lete and attach Employer 2 \$ \$ \$ \$	schedule A to ti Employer 3 \$ \$ \$	Employer 4 \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$	Employer 6 \$ \$ \$ \$	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00		
f no exp f you sp categori Expendi A. B. C.	penditures, including campa cent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging Advertising	ficial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ \$	or member of lolete and attach Employer 2 \$ \$ \$ \$ \$ \$	schedule A to the Employer 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 4 \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$	Total Expended \$ 0.00 \$ 0.00 \$ 0.00		
f no exp f you sp categori Expendi A. B. C.	penditures, including campa pent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging Advertising	ficial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$	or member of lete and attach Employer 2 \$ \$ \$ \$	schedule A to the Employer 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 4 \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00		
f no exp f you sp categori Expendi A. B. C. D.	penditures, including campa pent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging Advertising Travel	ficial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	or member of lolete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Schedule A to the schedule A t	Employer 4 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00		
f no exp f you sp categori Expendi A. B. C. D. E.	penditures, including campa pent money on any public of es per each employer you re ture Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses	ficial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	or member of lolete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	schedule A to the Employer 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 4 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00		

attach a Schedule B for each event.

Schedule A: WV Lobb (Attach this completed sheet to									
Complete this form if you have during this reporting period. If Gifts, (5) Other Expenditures - I	you have mad	e expenditure	s in these categ	gories - (1) A	Aeals & Bev				
If you shared any of these expename. You are not required to contributions] and Group Enter Schedule B.	report on Sch	edule A detaile	d expenditure	on Adverti	sing, Contri	butions (inclu	iding p	olitical	
1. Expenditure Details - (i	nclude shared	expenditures	not reported	n Schedule	B)				
Report all expenditures in any of those reported in Section 1a or reported on Schedule B. Trans lobbyist, identify who shared the	of the categori 2 (below) or fer the totals t	es listed below any portion of o section 5 on	on a particula a "Group Ente the Lobbyist A	r person or rtainment" (ctivity Repo	member of OR "Shared	Expense" eve	ent whi	ch are to be	
Recipient name(s) and date of	expenditure	Meals & beverages	Lodging	Travel	Gifts	Other	Tota	1 \$ ended	
Del Steve Westfall - 12/13	/2022	17.20						17.20	
				-					
	•		. 4						
	,								
TOTAL Expenditur	es								
1a Gifts (Group)			,			. ,		٠,	
Ordinarily gifts to individual leg of the House or Senate, the en- group it was given and the total Transfer the total cost to the Lo	tire Legislature Il cost. You ne	e or to standing ed not list each	or joint comm legislator who	ittees must	be listed h	ere. Describe	the ite	em, to which	
Describe the gift(s)	n employer provided the gift?		Which gr	oup receive	Total	Total cost of gift(s)			
Describe the girt(s)			8						
, =						-			
2. Participation in a Pane Report expenditures on a parti				when such e	expenditure	was for the i	ndividu	al's	
participation in a panel or spea	king engagem	ent. Transfer t	he totals to se	ction 5 on th	ne Lobbyist	Activity Repo	rt.	,	
Recipient name and event Meals &		Lodging	Travel	Gifts		duled entertain	ment	Total \$	
	beverages				& oth	ner		expended	
WV Ins. Commission Allan McVey	31.75	278.00)					309.75	
3. Subjects of Lobbying For each recipient identified in	1. 1a & 2 abov	ve. explain brie	fly the subject	of lobbying	z. List the i	ndividual or g	roup re	ecipient and	
then the subject matter of the Del. Steve Westfall - Insurance; W	lobbying. Exam	mple: "Del. Joe	Jones - Healtl						

Name: Jill C. Rice

Date: