## **RECEIVED**

By WV Ethics Commission at 3:58 pm, Sep 01, 2023

**West Virginia Ethics Commission** 

## **Lobbyist Activity Report Form**

2023-02

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

Rec'd\_

For office use only: Postmark

Days late

No faxed copies

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

1. Name and contact information										
Name Eli Baumwell						Phone 607-279-9057				
Address PO Box 3952						Email <u>e</u>	<sub>Email</sub> ebaumwell@acluwv.org			
City, State Zip Charleston, WV 25392										
2. Reporting period for which this activity report is being filed										
Check		eriod	Due Date	is being med						
Х		/1/23-8/31/23	9/15/23	-						
		, _,	5, 25, 25	-						
				-						
2 1	2. List all amplement a granizations that you represent as a labbuist.									
	3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.									
1. ACLU of WV 4										
2 5										
3 6										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
Direct lobbying during interims. No expenditures.										
Γ										
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.										
								Total Expended		
Α.	Meals and Be		\$	\$	\$	\$	\$	\$	\$	
В.	Lodging				\$	\$	\$	\$		
C.	Advertising	Advertising \$ \$ \$		\$	\$	\$	\$			
D.	Travel			\$	\$	\$	\$			
E.	Gifts		\$ \$ \$		\$	\$	\$	\$	\$	
F.	Other Expens	ses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expend	ditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Co	ntributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$					\$		
l.	TOTAL of all	expenditures	\$	\$	\$	\$	\$	\$	\$	
If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and										
l attach	attach a Schedule B for each event.									