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West Virginia Ethics Commission

Lobbyist Activity Report Form

2023-03

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

| Late reporting fine - \$10 per business day past the due date (\$250 maximum) | | | | | | | Postmark Rec o Days late Fine | | | |
|---|--------------------------|---|--------------------------------|--|--------------------------------------|---|--------------------------------|-----------------|--|--|
| 1. N | me and co | ntact information | | and the contract of the contra | | | <u> </u> | , (V | The state of the s | |
| Addres | | nner Bo 5 W. Ki Whishu | | | 5401 | Phone Email <u>\</u> | 304- Summa | 701- ur@w | SOOS Vaccess.co | |
| 2. Re | porting pe | riod for which this | activity repor | t is being filed | | | | | | |
| Check | Report | Period | Due Date | CONTRACTOR OF THE PARTY OF THE | | 250 | | | | |
| x | 2023-3 | 9/1/23-12/31/23 | 1/15/24 | | per and | The same of | | | | |
| | | | | 25 OF 1 OF | and the second | | | | | |
| | | | | | | P. S. | | | 1 | |
| 3. Lis | t all emplo | yers/organizations | that you rep | resent as a lobb | vist | Us | e additional rep | porting forms i | f necessary. | |
| | | livity summary - if the | | | 6 | "none." | | | | |
| | penditures | | | | | | | | | |
| If no ex | penditures | , including campaig | n contributio | ns, mark here: | | | | | | |
| If you sp categor | pent mone ies per eac | y on any public offic h employer you rep | cial, employee resent. Comp | or member of lete and attach | his or her immed Schedule A to th | liate family, list is report. | | | | |
| Expend | cpenditure Categories | | Employer 1 | Employer 2 | Employer 3 | Employer 4 | Employer 5 | Employer 6 | Total Expended | |
| A. | | Beverages | \$ | \$ | \$ | \$ | \$ | \$ | \$ | |
| | Lodging | | \$ | \$ | \$ | \$ | \$ | \$ | \$ | |
| | Advertising | 3 | \$ | \$ | \$ | \$ | \$ | \$ | \$ | |
| D. | Travel | | | \$ | \$ | \$ | \$ | | | |
| E. | Gifts | | | \$ | \$ | \$ | \$ | | | |
| F. 1 | Other Expe | enses | Š | Ś | 1.5 | 1.5 | 1 2 | \$ | 2 | |

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If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and

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LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.

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Continued on page 2

Group Expenditures

attach a Schedule B for each event.

Campaign Contributions

TOTAL of all expenditures

G.