## **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

RECEIVED

Late reporting fine - \$10 per business day past the due date (\$250 md By WV Ethics Commission at 12:12 pm, Jan 16, 2024

							• '	
1. Name and contact information								
Name Clifton Addison					Phone 646-324-8250			
Address PO Box 4184					Fmail	Email addisonet@everytown.org		
							(6) 0 1 0 1 1 1 1 1	g
City, State Zip_ New York, NY 10163								
2. Reporting period for which this activity report is being filed								
Check		Due Date	is being med					1
х	2023-3 9/1/23-12/31/23		-		_			
	3, 2, 23 22, 23		+					
			1					
	<u> </u>		<u> </u>		<u>'</u>			_
3. Li	List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.							
1. Everytown for Gun Safety Action Fund 4								
2 5								
3. <u> </u>								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
None.								
5. Expenditures								
If no expenditures, including campaign contributions, mark here: _ X _								
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.								
Expen	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
В.	Lodging	\$	\$	\$	\$	\$	\$	\$
C.	Advertising	\$	\$	\$	\$	\$	\$	\$
D.	Travel	\$	\$	\$	\$	\$	\$	\$
E.	Gifts	\$	\$	\$	\$	\$	\$	\$
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$
Н.	Campaign Contributions	LIST AMOUN	T IN "TOTAL EX	PENDED" COLU	MN.			\$
I.	TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$ 0.00
If you	sponsored or contributed to ar	ny group event	or shared expe	nses, list the tot	al expended in c	ategory 5G imn	nediately above	e. Complete and
attach a Schedule B for each event.								