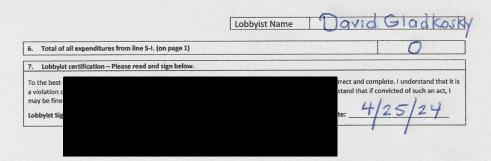
RECEIVED

By WV Ethics Commission at 2:37 pm, Apr 25, 2024

2024	byist Activity				Attn: Lobb 210 Brooks Charleston 304-558-06 For office us Postmark	e only:		No faxed copies
L. N	ame and contact information							
Name Addre	Pavid G 2525 W	ladk oodla eston 253	nd A	ve_	Phone_ Email_	304-1 David	50-1 OWV	598 Profed.
2. F	eporting period for which this	activity report	is being filed					
Check		Due Date 5/15/24						
3. I	ist all employers/organization WV Profes			4		e additional rep		necessary.
7		-						
4. 1			ctivity or expen	ditures, indicate	"none."			
4. 1	obbying activity summary - If		ctivity or expen	ditures, indicate	"none."			
	obbying activity summary - If		ctivity or expen	ditures, indicate	"none."			
5.	obbying activity summary - If	there was no a	ons. mark here:					
5. If no	cobbying activity summary - If	there was no a	ons, mark here:	his or her immed	iate family, list	the amounts sp	ent in each of t	the following
5. If no If you categ	cobbying activity summary - if	there was no a	ons, mark here: e or member of olete and attach	his or her immed Schedule A to th	iate family, list is report.			
5. If no If you catego Expe	Expenditures expenditures, including campa spent money on any public of ories per each employer you re nditure Categories	there was no a lign contributio ficial, employee present. Comp	ons, mark here: e or member of elete and attach Employer 2	his or her immed Schedule A to th Employer 3	iate family, list is report. Employer 4	Employer 5	Employer 6	Total Expended
5. If no If you catego Expe	Expenditures expenditures, including campa spent money on any public of ories per each employer you re nditure Categories Meals and Beverages	there was no a sign contribution in the contri	ens, mark here: e or member of elete and attach Employer 2	 his or her immed Schedule A to th Employer 3	iate family, list is report. Employer 4	Employer 5	Employer 6	Total Expended
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5. If no lif you catego Expe A. B. C.	Expenditures expenditures, including campo spent money on any public of ories per each employer you re inditure Categories Meals and Beverages Lodging Advertising	there was no a	ons, mark here: or member of elete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to th Employer 3 \$ \$	iate family, list is report. Employer 4 \$ \$	Employer 5 \$ \$ \$	Employer 6 \$ \$ \$	Total Expended \$ \$
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55. If no lif you category Expe A. B. C. D. E.	expenditures expenditures, including campa spent money on any public of ories per each employer you re nditure Categories Meals and Beverages Lodging Advertising Travel Gifts	ign contribution ficial, employee present. Comp Employer 1 \$ \$ \$ \$ \$	ens, mark here: e or member of lete and attach Employer 2 \$ \$ \$ \$ \$ \$	his or her immed Schedule A to th Employer 3 \$ \$ \$ \$	iate family, list is report. Employer 4 \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$	\$ \$ \$ \$ \$
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5. If no categorial Experiments A. B. C. D. E. F. G.	Expenditures expenditures, including campa spent money on any public of ories per each employer you re inditure Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses Group Expenditures	there was no a	ens, mark here: e or member of oldete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	his or her immed Schedule A to th Employer 3 S S S S S S S S S S S S S S S S S S	iate family, list is report. Employer 4 \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expended \$ \$ \$ \$ \$ \$ \$ \$ \$
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Lobbyist Activity Report page 1



Lobbyist Activity Report page 2