## **West Virginia Ethics Commission**

## **Lobbyist Activity Report Form**

2024-2

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 maxim									Rec'd			
1. Name and contact information							By WV Ethics Commission at 3:00 pm, Sep 16, 202					
Name Elaine A. Harris							Phone (Office)304-342-2023 (Cell) 304-541-7293					
Address 400 Allen Drive, Suite 100						Email eharris@cwa-union.org						
Addre	-55	•			Email							
	City, State Zip Charleston, WV 25302											
City, S	State Zip C	manesion, vv v	25502									
		eriod for which thi			s being filed							
Check	<del></del>	Period	Due Da	_			15 1371					
X	2024-2	5/1/24-8/31/24	9/16/	2024			STATE OF					
				-								
3. L	ist all emplo	oyers/organizatior	ns that you	repre	sent as a lobb	byist	Us	se additional re	porting forms i	if necessar	y.	
Communications Workers of America, AFL-CIO												
W// Transpare Association/CWA Local 2010												
2		7,000014110	JIII O 117 1 E	-0001	2010	5					_	
3						6					_	
4. L	obbying act	ivity summary - If	there was	no act	ivity or expe	nditures indicate	"none"					
		DOC&R & Over						for DOCS D	Cumport Ctol			
- Dude	get, Di 13/1	DOCAIN & OVE	an Buuge	; t - F c	ay increase		S/Fay Equity	IOI DOCAR	Support Star	He		
Tele	com/Broad	dband, Trooper	s/Law En	force	ment & Pu	blic Safety/Pag	y Increase/S	taffing				
-												
L												
5. E	xpenditures	·										
If no e	xpenditures	s, including campa	ign contrib	utions	, mark here:	V						
		y on any public off				_	iate family, list	the amounts sp	ent in each of	the followi	ng	
		h employer you re										
Expen	Expenditure Categories		Employer 1		Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Ex	pended	
A.	Meals and	l Beverages	\$ 0.	.00	\$	\$	\$	\$	\$	\$	0.00	
B.	Lodging		\$ 0.	.00	\$	\$	\$	\$	\$	\$	0.00	
C.	Advertisin	g	\$ 0.	.00	\$	\$	\$	\$	\$	\$	0.00	
D.	Travel		\$ 0.	.00 :	\$	\$	\$	\$	\$	\$	0.00	

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

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LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.

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Other Expenses

**Group Expenditures** 

**Campaign Contributions** 

**TOTAL** of all expenditures

Ε.

F.

G.

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Gifts

6. Total of all expenditures from line 5-I. (on page 1)	0.00						
7. Lobbyist certification – Please read and sign below.							
To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code §6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I may be fined, sentenced to jail or both.							
Lobbyist Signature: Claime a. Harris	Date: 09/16/2024						

Lobbyist Name

Elaine A. Harris