Received

West Virginia Ethics Commission

Lobbyist Activity Report Form SEP 1 3 2024

2024-2

WV Ethics Commission

West Virginia Ethics Commission
Attn: Lobbyist Registrar
210 Brooks St., Ste. 300
Charleston, WV 25301
304-558-0664 No faxed copies
For office use only:
Postmark ______ Rec'd____
Days late _____ Fine _____

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

1. Name and contact information										
Name Jason Whalen						Phone	Phone 614-480-5567			
Address 41 S. High St.							Email jason.whalen@huntington.com			
HC0330										
City, State Zip										
2. Reporting period for which this activity report is being filed										
Check	1	Period	Due Date	lis being mea	1 1 1 1 1 1 1 1 1	E CANON	1			
X	2024-2	5/1/24-8/31/24	9/16/2024							
			-,,			La de la				
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.										
	1. Huntington Bancshares Inc.									
1.	1. Huntington Baricshares inc. 4									
2.	2 5									
	36.									
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:										
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 Cate	gories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and	Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertisin	g	\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses		\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures		\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$									
I.		all expenditures	\$	\$	\$	\$	\$	\$	\$ 0	
		or contributed to a	ny group event	or shared expe	nses, list the tot	al expended in c	ategory 5G imn	nediately above	2. Complete and	
attach a Schedule B for each event.										