## **West Virginia Ethics Commission**

## **Lobbyist Activity Report Form**

2023-03

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300

RECEIVED

No faxed copies

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

By WV Ethics Commission at 3:36 pm, Jan 10, 2024

1. Name and contact information										
Name Andrew Jennison						Phone	(571) 279-7715			
Address 11235 Random Hills Road, 8th floor							· · ·			
Address 11235 Random Hills Road, 8th floor Email andrew.jennison@cgi.com									<u> </u>	
<del></del>										
City, State ZipFairfax, VA 22030										
2. Reporting period for which this activity report is being filed										
Check	Report	Period	Due Date							
Х	2023-3	9/1/23-12/31/23	1/15/24	]						
3. List all employers/organizations that you represent as a lobbyist   Use additional reporting forms if necessary.										
CCI Tachnalagian 9 Calutiana Ina										
1.	1. CGI rechnologies & Solutions, Inc. 4.									
2. <u> </u>										
3 6										
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 Categ		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.		Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertisin	g	\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Exp		\$	\$	\$	\$	\$	\$	\$	
G. H.		up Expenditures \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ paign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.								
н. <b>I.</b>		all expenditures	\$	Ś	S COLUI	Ś	\$	Ś	\$	
				•			1 -		τ	
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.										