

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  
 304-558-0664

No faxed copies

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

**RECEIVED**

By WV Ethics Commission at 12:36 pm, Jan 16, 2024

**1. Name and contact information**

Name Amber Perry  
 Address Access Strategies  
PO Box 455  
 City, State Zip Bolt WV 25817

Phone 406-672-0157  
 Email amber@wvaccess.com

**2. Reporting period for which this activity report is being filed**

Check	Report	Period	Due Date				
x	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.

1. WV Rural Water Assoc.
2. Hospice Council of WV
3. WV Propane Gas Assoc.
4. WV Community Action Partnership
5. Kanawha County Ambulance Authority
6. Berkeley County Commission

**4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."**

water/wastewater, healthcare, energy, taxation, budget, DMHR, EMS

**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.

Expenditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A. Meals and Beverages	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
B. Lodging	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
C. Advertising	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
D. Travel	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
E. Gifts	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
F. Other Expenses	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
G. Group Expenditures	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$ 392.95
I. TOTAL of all expenditures	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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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