West Virginia Ethics Commission

Lobbyist Activity Report Form

If no expenditures, including campaign contributions, mark here: $\underline{\hspace{1cm}}$

2024-2

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

DECEIVED WAR

304-558-0664 No faxed copies

Late re	eporting f	ine - \$10 per busi	ness day past the (due date (\$250 maximu		ssion at 11:31 am, Sep 16, 202		
1. Na	ame and co	ontact information			By WY Lanes Commis	3.011 at 11.01 at 11, 3cp 10, 202		
Name Page Faulk					Phone (202) 659-6000			
Address 1615 H Street NW					Email PFaulk@USChamber.com			
City, St	ate Zip V	/ashington, DC 2	20062					
2. Re	porting pe	eriod for which this	activity report is bei	ng filed				
Check	Report	Period	Due Date					
х	2024-2	5/1/24-8/31/24	9/16/2024					
3. Lis	t all empl	oyers/organizations	that you represent	as a lobbyist	Use additional re	eporting forms if necessary.		
1. U.S. Chamber of Commerce								
2.	2							
3				6				
4. Lo	hhying act	ivity summary - If t	here was no activity	or expenditures, indicate	"none"			
None		ivity summary - ii t	nere was no activity	or experiorcures, marcate	none.			
INOTIE	ヺ. 							
5. Ex	penditure	s	<u> </u>					

catego	ories per each employer you re	present. Comp	liete and attach	Schedule A to ti	nis report.			
Expenditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$0
В.	Lodging	\$	\$	\$	\$	\$	\$	\$0
C.	Advertising	\$	\$	\$	\$	\$	\$	\$0
D.	Travel	\$	\$	\$	\$	\$	\$	\$0
E.	Gifts	\$	\$	\$	\$	\$	\$	\$0
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$0
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$0
H.	Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$0						
I.	TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$0
If wou	spansared or contributed to a	ny graun ayant	or shared expe	ncoc list the tot	al ovnandad in s	atagan, EC imp	andiataly above	o Complete and

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

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.

	Lobbyist Name	Page Faulk				
6. Total of all expenditures from line 5-I. (on page 1)		0	\neg			
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: Page Faulk		Date:				