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West Virginia Ethics Commission

Lobbyist Activity Report Form



	OCT 2 6 2023	
irginia Ethics Commissi	DIT D LOLD	
obbyist Registrar		
oks St., Ste. 300 A/\/	Ethics Commission	on
ton, WV 25301	201100 001111110	
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use only:		
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·	Fine	
3-0664 e use only: k	Rec'd	ed c

Late	reporting fine - \$10 per bus	siness day pas	t the due date	e (\$250 maxim	um) Days late _		Fine		
1. 1	Name and contact information)		J.					
Name Jason Webb					Dhone	Phone 304-415-9322			
Addre	Address 240 Waterfront Ln				Email <u>J</u>	Email jason@cawv.com			
City, S	State Zip Scott Depot, \	NV 25560					eu e e e e e e e e e e e e e e e e e e		
2. F	Reporting period for which thi	s activity repor	t is being filed						
Check	Report Period	Due Date							
حق	THE CHARLES								
X	2012-11/12-4/30/	i)							
		(
3. i	ist all employers/organization	ns that you rep	esent as a lobb	yist	Usi	e additional rej	orting forms (f necessary.	
	WVAEPS				kersburg B	ridge Partr	ers		
_			= 12=0, 2==3=		elite Group				
_	Genesis Partners								
3	Hear.com			6. SC	IC				
4 1	.obbying activity summary - If	there was no s	ethilhi an aynar	adituras indicat	o "nono "				
			ctivity of exper	iditures, indicat	e none.				
Atte	ended Interim meeting	gs							
-									
5. E	Expenditures								
	expenditures, including campo	ion operations	ne mark harar	$-\Box$					
	spenditures, including campa spent money on any public of			his or hos immo	diata family list:	the amounts so	ont in each of	the following	
	ories per each employer you re					the amounts sp	ent ni each or	nie ronownig	
	nditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages	\$	\$572.68	\$41.99	\$	\$	\$	\$614.67	
В.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	S	\$	\$	S	\$	
G.	Group Expenditures	s	S	\$472.42	\$	\$	\$214.20	\$686.62	
Н.	Campaign Contributions			(PENDED" COLU	1 *			\$750.00	
	TEMPER CONTRIBUTIONS	1		1.	1.	TA			

I. TOTAL of all expenditures \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$2051.29

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.

Continued on page 2