

Received

APR 28 2021

WV Ethics Commission

West Virginia Ethics Commission

# Lobbyist Activity Report Form

2021-01

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 Shanna Chamblee Phone 334-235-0650  
 Address 5075 Titus Rd Email schamblee@termlimits.com  
 City, State Zip Titus, AL 36080

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

| Check | Report  | Period           | Due Date |  |  |  |  |
|-------|---------|------------------|----------|--|--|--|--|
| x     | 2021-01 | 1/1/21 - 4/30/21 | 5/17/21  |  |  |  |  |
|       |         |                  |          |  |  |  |  |

3. List all employers/organizations that you represent as a lobbyist *Use additional reporting forms if necessary.*

1. U.S. Term Limits 4. \_\_\_\_\_  
 2. \_\_\_\_\_ 5. \_\_\_\_\_  
 3. \_\_\_\_\_ 6. \_\_\_\_\_


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

Spoke to members about our resolution & encouraged them to sign on as co-sponsors

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       | \$  | \$         | \$         | \$         | \$         | \$         | \$ 0.50        |
| B. Lodging                   | \$  | \$         | \$         | \$         | \$         | \$         | \$             |
| C. Advertising               | \$  | \$         | \$         | \$         | \$         | \$         | \$             |
| D. Travel                    | \$  | \$         | \$         | \$         | \$         | \$         | \$             |
| E. Gifts                     | \$  | \$         | \$         | \$         | \$         | \$         | \$             |
| F. Other Expenses            | \$  | \$         | \$         | \$         | \$         | \$         | \$             |
| G. Group Expenditures        | \$  | \$         | \$         | \$         | \$         | \$         | \$             |
| H. Campaign Contributions    | LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.  |            |            |            |            |            | \$             |
| I. TOTAL of all expenditures | \$  | \$         | \$         | \$         | \$         | \$         | \$ 0.00        |

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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