

Received
SEP 02 2022
WV Ethics Commission

West Virginia Ethics Commission
Lobbyist Activity Report Form
2022-01

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 Edward J. George Phone 304-357-9938
Address P. O. Box 11887 Email edward.george@dinsmore.com
City, State Zip Charleston, WV 25539-1187

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

Check	Report	Period	Due Date
x	2022-2	5/1/22-8/31/22	9/15/22

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

1. Distilled Spirits Council of the U.S. 4. The Winebow Group
2. Waste Management of West Virginia, Inc. 5. _____
3. West Virginia Manufacturers Association 6. _____

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

Business & Industry; Taxation; Retail; Gaming; Beverage & Alcohol; 1st Amendment; 21st Amendment; Environmental;
Solid Waste; Manufacturing; WV Government Instrumentality & Public Body Corporate; Oil & Gas; Health Care

5. Expenditures

If no expenditures, including campaign contributions, mark here: X

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	\$	\$	\$	\$	\$	\$	\$
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

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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