## **RECEIVED**

By Ethics Commission at 5:50 pm, Sep 13, 2022

West Virginia Ethics Commission

## **Lobbyist Activity Report Form**

2022-02

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

304-558-0664 For office use only:

Postmark

Days late

No faxed copies

Rec'd

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

(f maximum)										
1. Name and contact information										
Name Robert L. Johns						Phone	Phone 304-720-2300			
Address 808 Greenbrier Street						Email rjohns@turnerjohns.com				
Email 19 most anno										
Observators MAN OF OAA										
City, State Zip Charleston, WV 25311										
2. Reporting period for which this activity report is being filed										
Check		Period	Due Date							
х	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.										
. American Express										
- "										
2 5										
36,										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
, and a second of the second o										
<u>None</u>										
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.										
Expend	diture Categ	gories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and	Beverages	\$	\$	\$	\$	\$	\$	\$	
B.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertisin	g	\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Exp	enses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Exp	enditures	\$	\$	\$	\$	\$	\$	\$	
Н.		Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$							
I.		all expenditures	\$	\$	\$	\$	\$	\$	\$0.00	
If you s	ponsored o	r contributed to an	y group event	or shared expe	nses, list the tot	al expended in c	ategory 5G imm	ediately above	e. Complete and	
attach	attach a Schedule B for each event.									