## RECEIVED

By Ethics Commission at 1:37 pm, Jan 10, 2023

## West Virginia Ethics Commission Lobbyist Activity Report Form

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 $\qquad$ Rec'd

Fine $\qquad$
Days late $\qquad$
$\qquad$

1. Name and contact information

| Name Matt Walker | Phone 304-733-6484 |
| :---: | :---: |
| Address 650 Main Street | Email matt@walkerandstevens.com |

City, State Zip Barboursville, WV 25504
2. Reporting period for which this activity report is being filed

| Check | Report | Period | Due Date |  |  |  |  |  |
| :---: | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| $x$ | $2022-3$ | $9 / 1 / 22-12 / 31 / 22$ | $1 / 16 / 23$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.
4. Please see the attached client list.
5. $\qquad$
6. $\qquad$
7. $\qquad$
8. 

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

Attended special session meetings, interim meetings, and discussed health policy issues with legislators and staff.

## 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 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| B. | Lodging | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| C. | Advertising | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| D. | Travel | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| E. | Gifts | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| F. | Other Expenses | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| G. | Group Expenditures | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| H. | Campaign Contributions | LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. |  |  |  |  |  | \$4,250 |
| I. | TOTAL of all expenditures | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$4,250 |

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.

## MATTHEW R. WALKER - ATTACHMENT <br> EMPLOYERS/ORGANIZATIONS <br> (2022-03)

1. West Virginia Primary Care Association
2. ModivCare Solutions, LLC
3. West Virginia Academy of Family Physicians
4. West Virginia Academy of Eye Physicians \& Surgeons
5. West Virginia Independent Pharmacy Association
6. Purdue Pharma L.P.
7. Jazz Pharmaceuticals, Inc. and its Subsidiaries, including Greenwich Biosciences, Inc.
8. Hikma Specialty USA Inc. c/o Velocity BioGroup
