## **RECEIVED**

By WV Ethics Commission at 2:21 pm, May 24, 2023

**West Virginia Ethics Commission** 

## **Lobbyist Activity Report Form**

2023-01

**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 \_\_\_7\_ \$70.00 Fine

Late reporting fine - \$10 per business day past the due date (\$250 maximum)									
1. Name and contact information									
Name	Charles	Conley				Phone 502-875-3332			
Address 85 C Michael Davenport Blvd						Email cconley@usw.org			
Address 33 5 Wildings Daveriport Divu						Email coorney@dsw.org			
City, State Zip Frankfort, KY 40601									
2. Reporting period for which this activity report is being filed									
Check Report Period Due Date									
х	2023-01	1/1/23-4/30/23	5/15/23	Section 1					
						4 5			
3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.									
1. United Steelworkers 4									
2 5									
_									
3 6									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
None									
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									
catego	ries per eacl	h employer you re	oresent. Comp	olete and attach	Schedule A to t	his report.			
Expend	diture Categ	ories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.	Meals and	Beverages	\$0	\$	\$	\$	\$	\$	\$0
B.	Lodging		\$0	\$	\$	\$	\$	\$	\$0
C.	Advertising	g	\$0	\$	\$	\$	\$	\$	\$0
D.	Travel \$0 \$ \$		\$	\$	\$	\$	\$0		
E.	Gifts		\$0	\$	\$	\$	\$	\$	\$0
F.	Other Expe	enses	\$0	\$	\$	\$	\$	\$	\$0
G.	Group Exp	enditures	\$0	\$	\$	\$	\$	\$	\$0
Н.	Campaign	Contributions	LIST AMOUNT IN "TOTAL EXPENDED"			MN.			\$
l.	TOTAL of a	all expenditures	<b>\$</b> 0	\$	\$	\$	\$	\$	\$0
If you s	ponsored o	r contributed to ar	y group event	or shared expe	nses, list the tot	al expended in c	ategory 5G imn	nediately above	e. Complete and
attach a Schedule B for each event.									

Continued on page 2