West Virginia Ethics Commission

Lobbyist Activity Report Form

2023-02

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664

Days late

304-558-0664 No faxed copies
For office use only:
Postmark _____ Rec'd_____

Fine

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

| 1. Name and contact information | | | | | | | | | |
|---|---|-------------|----------------|---------------|----------------------------|--------------------|--------------|----------------|--|
| Name S. Ryan White | | | | | Phone | Phone 304-720-1400 | | | |
| Address 600 Kanawha Blvd. E. Suite 201 | | | | | Email rwhite@whitepllc.com | | | | |
| | Addi C53 | | | | | | | | |
| City, State Zip Charleston WV 25301 | | | | | | | | | |
| 2. Reporting period for which this activity report is being filed | | | | | | | | | |
| Check | | Due Date | | H . L | 1 2 2 1 | | | | |
| х | 2023-02 4/1/23-8/31/23 | 9/15/23 | | | 15 To 18 | | | | |
| | | | | | E SHITTER ST | | | | |
| | | | | | | | | | |
| 3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary. | | | | | | | if necessary | | |
| | 1. Wheeling Island Racetrack and Casino 4. Communicare | | | | | y necessury. | | | |
| | | | | 4 | minamouro | | | | |
| | . Elevator Industry Work | | tion Fund | 5 | | | | | |
| ₃. Interstate Gas Supply 6. | | | | | | | | | |
| | | | | | | | | | |
| 4. L | 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." | | | | | | | | |
| talking with executive and legislators re: client issues | | | | | | | | | |
| laiki | ng with executive an | u legislato | rs re: clieni | issues | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 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. | | | | | | | | | |
| Expen | diture 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 AMOUN | T IN "TOTAL EX | PENDED" COLUI | VIN. | | - | \$ | |
| I. | TOTAL of all expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ | |
| 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. | | | | | | | | | |

| | Lobbyist Name | S. Ryan White | | | | |
|--|---------------|---------------|-----------|--|--|--|
| 6. Total of all expenditures from line 5-l. (on page 1) | | | 0 | | | |
| 7. Lobbyist certification – Please read and sign below. | | | | | | |
| To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code §68/3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I may be fined, sentenced to liail or both. | | | | | | |
| Lobbyist Signature: | | Date: | 1/11/2023 | | | |

West Virginia Ethics Commission

Lobbyist Activity Report Form

2023-02

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

304-558-0664

For office use only:

Postmark

No faxed copies

Rec'd

| Late reporting fine - \$10 per business day past the due date (\$250 maximum) | | | | num) Days late | | Fine | | | |
|---|--|-------------|----------------|----------------|------------|----------------------------|------------|----------------|--|
| 1. | Name and contact informatio | n | | | | | | | |
| Nome | Name Steven F. White Phone 304-720-1400 | | | | | | | | |
| Filone | | | | | | | | | |
| Addr | ess boo Kanawna Bive | a. E. Suite | 201 | | Email _ | Email swhite@whitepllc.com | | | |
| | | | | | | | | | |
| City. | City, State Zip Charleston WV 25301 | | | | | | | | |
| 0.0,7 | | | | | | | | | |
| 2. 1 | 2. Reporting period for which this activity report is being filed | | | | | | | | |
| Check | | Due Date | t is being med | | | | | | |
| х | 2023-02 4/1/23-8/31/23 | 9/15/23 | HILD III | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 3. L | 3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary. | | | | | | | if wassesses. | |
| | | | | | | | | | |
| | 1. Wheeling Island Racetrack and Casino 4. | | | | | | | | |
| 2 | 2. Elevator Industry Workers Preservation Fund 5 | | | | | | | | |
| 3 | • | | | 6. | | | | | |
| | J | | | | | | | | |
| 4. L | 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." | | | | | | | | |
| | | | | | e "none." | | | | |
| talkı | ng with executive an | d legislato | rs re: client | issues | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 5. E | xpenditures | | | | | | | | |
| 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. | | | | | | | | | |
| Expen | diture 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 | \$ | \$ | \$ | \$ | \$ | \$ | \$ | |
| Н. | Campaign Contributions | | | PENDED" COLU | | | | \$ | |
| 1. | TOTAL of all expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ | |

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.

| | Lobbyist Name | Steven F. White |
|--|--|---|
| 6. Total of all expenditures from line 5-I. (on page 1) | | 0 |
| 7. Lobbyist certification – Please read and sign below. | | |
| To the best of my knowledge, the information contained hereon and a violation of WV Code §6B-3-9 to willfully and knowingly file a false may be fined, sentenced to jail or both. Lobbyist Signature: | d on any attached material or incomplete report. I fu | Is is true, correct and complete. I understand that it is urther understand that if convicted of such an act, I |