## RECEIVED

West Virginia Ethics Commission

## Lobbyist Activity Report Form

2023-02

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

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 $\qquad$
Fine

| 1. Name and contact information |  |
| :---: | :---: |
| Name Clifton Addison | Phone 646-324-8250 |
| Address PO Box 4184 | Email lobbyreg@everytown.org |
| City, State Zip_ New York, NY 10163 |  |


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

1. Everytown for Gun Safety Action Fund
2. 
3. $\qquad$ 5. $\qquad$
4. 
5. $\qquad$
6. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

None
5. Expenditures

If no expenditures, including campaign contributions, mark here: $\square$ _
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 AMOU | IN "TOTAL | ENDED" COL | N. |  | - | \$ |
| 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. |  |  |  |  |  |  |  |  |

