Received

SEP 11 2023

West Virginia Ethics Commission

WV Ethics Commission

Lobbyist Activity Report Form

2023-02

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

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

	No faxed copies
Rec'd	
Fine	
	_

1. Name and contact information										
Name Irvin Dwayne O'Dell Address 858 Little Lefthand Rd Phone (304) 871-0885 Email dwayneo @ WVfarm.org										
Address 858 Little Lefthand Rd Email dwayneo@ WVfarm.org										
Email										
A VIVI - MARK										
City, State Zip Amma, WV 25005										
2. Reporting period for which this activity report is being filed										
Check		Due Date		TOTAL DESCRIPTION	ER CARE					
х	2023-02 4/1/23-8/31/23	9/15/23								
					Yes and					
			No.							
3. L	3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.									
1. West Virginia Farm Buteau Inc. 4.										
1. West Virginia Farm Bureau Inc. 4. 2. WV Poultry Association 5.										
_	1		7.7011	5						
3				6						
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
None										
5. E	xpenditures									
If no expenditures, including campaign contributions, mark here:										
If you	spent money on any public off	igii contributio	ns, mark nere:	$-\!\!\perp\!\!\Delta\!\!-\!\!\!-$!:_+_ £! !:_+					
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.										
	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended		
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$		
В.	Lodging	\$	\$	\$	\$	\$	\$	\$		
C.	Advertising	\$	\$	\$	\$	\$	\$	\$		
D.	Travel	\$	\$	\$	\$	\$	\$	\$		
E.	Gifts	\$	\$	\$	\$	S	\$	\$		
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$		
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$		
Н.	Campaign Contributions	LIST AMOUN		PENDED" COLU	T	1 *	7	\$		
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.										

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