



WV Lobbyist Payment Cover Sheet

Complete this sheet and **attach it** to your Lobbyist Registration Statement.

Lobbyist Name: _____

Mailing Address _____

City, State, Zip _____

Phone: (____)_____ Secondary phone: (____)_____

Email: _____

Mark as appropriate:

Amount:

A. Lobbyist registration fee of \$100.00 \$ _____

B. Each company or organization that you represent as a lobbyist requires payment of \$100.00 each.
List these names below:

1. _____ \$ _____

2. _____ \$ _____

3. _____ \$ _____

4. _____ \$ _____

5. _____ \$ _____

Total of all fees \$ _____

Would you like a receipt for payment? _____

Make checks or money orders payable to **WV Ethics Commission**

Payment by credit card

American Express Discover Master Card Visa

Credit Card # _____

Amount: \$ _____ Expiration date: ____/____ CVC Code: _____

Signature: _____

Send through U.S. Mail or Email to:

Teri.L.Anderson@wv.gov

WV Ethics Commission, Attn: Lobbyist Registrar, 210 Brooks Street, Suite 300, Charleston WV 25301

Phone: (304) 558-0664 or toll free (866) 558-0664