Received

MAY 11 2020

WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

2020-01

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 ____ Rec'd_ Days late _ Fine _

1. Name and contact information										
Name Francis S. Vitale Phone 304-288-0874										
Busine	Business Address 522 Ashebrooke Square Business Email fvitale@forgebz.com									
City, State Zip Morgantown, WV 26508										
2. R	Reporting period for which this activity report is being filed									
Check	Report	Period	Due Date							
x	2020-1	1/1/20 - 4/30/20	5/15/2020							
	-									
	1									
3. L	List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.									
1	Tim Ranzetta									
2	2 5									
3	3									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
WV State Legislature/ HB2775. Participated in Senate Education Committee Meetings. Conducted conversations with members of the house and senate (past and present.)										
VVV State Legislature, FIS2773, Farticipated in Senate Education Committee Meetings. Conducted conversations with members of the house and senate (past and present.)										
5. Expenditures										
If no expenditures, including campaign contributions, mark here:										
If you	spent mone	ey on any public off	icial, employee	or member of	his or her immed	diate family, list	the amounts sp	ent in each of t	the following	
categories per each employer you represent. Complete and attach Schedule A to this report.										
Expen	diture Cate	gories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals an	d Beverages	\$	\$	\$	\$	\$	\$	\$	
B.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertising		\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Exp	penses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Ex	penditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.				\$					
I.		fall expenditures	\$ 0	\$	\$	\$	\$	\$	\$0	
If you	If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and									
attach	attach a Schedule B for each event.									