AUG 2 5 2020

West Virginia Ethics Commission

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Busin	ess Entity:	Address:	BOX 1798
			SAINT ALBANS
Name of Authorized Agent:	MICAEL DEVIESE	Address:	WV 25177
Contract Number: 304-75			tion: GENERAL MANAGER
Governmental agency awar	ding contract:		
☐ Check here if this is a Si	upplemental Disclosure		
List the Names of Interested Pentity for each category below			ably anticipated by the contracting business
1. Subcontractors or other entities performing work or service under the Contract Check here if none, otherwise list entity/individual names below.			
	o owns 25% or more of cor erwise list entity/individual na	-	t applicable to publicly traded entities)
3. Any person or entity the services related to the ne	at facilitated, or negotiate gotlation or drafting of the	d the terms of, the applicable contra	e applicable contract (excluding legal ct) Steve Cvechko, owner
Signature:	nwise list antity/individual na	mes below. Date Signed	*
Notary Verification			
State of West Virgin	niaCo	unty of Putr	13h
I, <u>Michael Devices</u> entity listed above, being duly a penalty of perjury.	eswom, acknowledge that the		thorized agent of the contracting business is being made under oath and under the
Taken, swom to and subscribed	i before me this	day of	June , 2020.
To be completed by State Age Date Received by State Agency Date submitted to Ethics Comm Sovernmental agency submittin	r: 6 11 20 ission: But AUG	8 2020	C's Signature III MANUTUM MAN
CM	A DOT 6620COUT ProcAd: 762	W Filmini	205 Luke St, Hugheston, WV \$5130 ee June 8, 2018 My Commission Expires July 25, 2025 ee June 8, 2018 minimum muutilinnamuutilinnamuut