

Lobbyist Activity Report Form

2017-01

MAY 10 2017

WV Ethics Commission

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 _____

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

1. Name and contact information

Name: Howard M. O'Call, Ed. D. Phone: 304-346-0571 (o)

Address: W. Va. School Bd Assn. P.O. Box 1008 Email: hoecall@wvshba.org

City, State Zip: Charleston, WV 25324 304-549-9463 (mob. 18)

2. Reporting period for which this activity report is being filed

| Check | Report | Period | Due Date | | | | |
|-------------------------------------|---------|----------------|----------|--|--|--|--|
| <input checked="" type="checkbox"/> | 2017-01 | 1/1/17-4/30/17 | 5/15/17 | | | | |

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

1. WV School Bd Assn.

2. _____

3. _____

4. _____

5. _____

6. _____

4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

Public Education especially re relating to Co. Boards of Education

5. Expenditures \$0

If no expenditures, including campaign contributions, mark here:

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 AMOUNT IN "TOTAL EXPENDED" COLUMN. | | | | | | \$ |
| 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.

6. Lobbyist certification - Please read and sign below.

To the best of my knowledge, the information contained herein and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code, §22-2-1(c) to willfully make a false or misleading statement of fact or to willfully omit material information that is required to be disclosed.