

West Virginia Ethics Commission

# Lobbyist Activity Report Form

2018-01

Received

APR 16 2018

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 Joseph M. Ward Phone 304-348-2423  
 Address 500 Virginia Street, East, Suite 1100 Email jward@fbtlaw.com  
 City, State Zip Charleston, WV 25301

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

Check	Report	Period	Due Date
x	2018-1	1/1/18-4/30/18	5/15/2018

### 3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

- |  |          |
|--|----------|
| 1. <u>MedExpress Urgent Care, Inc. - West Virginia</u> | 4. _____ |
| 2. <u>Pomeroy</u>                                      | 5. _____ |
| 3. <u>American Municipal Power, Inc.</u>               | 6. _____ |

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

MedExpress Urgent Care, Inc. - West Virginia - health care and certificate of need issues.  
Pomeroy - information technology and procurement issues.  
American Municipal Power, Inc. - public utility regulation.

### 5. Expenditures

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 hereon and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code §6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I may be fined, sentenced to jail or both.

Lobbyist Signature: \_\_\_\_\_

Date: \_\_\_\_\_

4/16/18