

# Lobbyist Activity Report Form

2018-03

Received

JAN 28 2019

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 1/25

Days late 7

Rec'd \_\_\_\_\_

Fine \$70

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

**1. Name and contact information**

Name Michael I. Spiker Phone (304) 346-7000  
 Address 300 Summers Street, Suite 1500 Email mis@goodwingoodwin.com  
P. O. Box 2107 (25328)  
 City, State Zip Charleston, WV 25301

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

Check	Report	Period	Due Date				
x	2018-3	9/1/18-12/31/18	1/15/2019				

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

1. Fresenius Medical Care of North America 4. \_\_\_\_\_  
 2. \_\_\_\_\_ 5. \_\_\_\_\_  
 3. \_\_\_\_\_ 6. \_\_\_\_\_

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

Health Care

**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	\$ <u>0</u>	\$	\$	\$	\$	\$	\$
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	\$ <u>0</u>	\$	\$	\$	\$	\$	\$

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: [Signature] Date: January 1, 2019



I retired at end of 2018  
and thought office had  
mailed in after 11/19.  
Then was out of state  
Sorry for delay. I have  
always (I think) filed on time

Thank you for your  
consideration and if  
any late charge I request  
you waive

THANKS  
MIKE PIKER