



West Virginia Ethics Commission
Lobbyist Activity Report Form
 2019-03

West Virginia Ethics Commission
 Attn: Lobbyist Registrar
 210 Broyles St., Ste. 301
 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 Michelle C. Crist Phone 304-541-2969
 Business Address P.O. Box 2499 Business Email mcrist@WVBA.com
 City, State Zip So. Chas, WV 25303

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

| Check | Report | Period | Due Date | | | | |
|-------|--------|-------------------|-----------|--|--|--|--|
| x | 2019-3 | 9/1/19 - 12/31/19 | 1/15/2020 | | | | |

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

Use additional reporting forms if necessary.

- WV Broadcasters Assn
- _____
- _____
- _____
- _____
- _____

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

N/A

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 official, employee or member of his or her immediate family.

| Expenditure Category | Employee 1 | Employee 2 | Employee 3 | Employee 4 | Employee 5 | Employee 6 | Total |
|------------------------------|---|------------|------------|------------|------------|------------|-------|
| A. Meals and Refreshments | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| B. Lodging | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| C. Entertainment | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| D. Travel | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| E. Gifts | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| F. Other Expenses | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| G. Group Expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| H. Campaign Contributions | LIST AMOUNT IN "TOTAL EXPENSES" COLUMN. | | | | | | \$ |
| I. TOTAL of all expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

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 official, employee or member of his or her immediate family.