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MAY 15 2020

WV Ethics Commission

West Virginia Ethics Commission

# Lobbyist Activity Report Form

2020-01

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 Erik Hingst Phone 517-371-1400  
Business Address 208 N. Capitol, 3rd Floor Business Email erik.hingst@walmart.com  
City, State Zip Lansing, Michigan 48933

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

Check	Report	Period	Due Date				
x	2020-1	1/1/20 - 4/30/20	5/15/2020				

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

*Use additional reporting forms if necessary.*

1. Walmart Inc.
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

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

Senate Bill 544: Expansion of Pharmacists role for vaccines and flu. House Bill 4003: telehealth

### 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	\$0	\$	\$	\$	\$	\$	\$0
B. Lodging	\$0	\$	\$	\$	\$	\$	\$0
C. Advertising	\$0	\$	\$	\$	\$	\$	\$0
D. Travel	\$0	\$	\$	\$	\$	\$	\$0
E. Gifts	\$0	\$	\$	\$	\$	\$	\$0
F. Other Expenses	\$0	\$	\$	\$	\$	\$	\$0
G. Group Expenditures	\$0	\$	\$	\$	\$	\$	\$0
H. Campaign Contributions	<i>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</i>						\$0
I. TOTAL of all expenditures	\$0	\$	\$	\$	\$	\$	\$0

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.