

Received

APR 21 2020

West Virginia Ethics Commission

WV 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 Samuel A. Minardi Phone 304-542-8786
Business Address 1526 Bedford Rd Business Email sam.minardi@gmail.com
City, State Zip Charleston, WV 25314

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. Longview Power
- 2. Consumer Healthcare Products Assoc.
- 3. ExxonMobil
- 4. Fifth Third Bank.
- 5. First Energy
- 6. Miller Coors
- 7. Segra


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

Nat. gas production issues & legislation (expedite permit, direct sale bill), local government preemption on OTC drugs, DEP rules bundle, WVABCC Rules, DOH right of way access for telecom & utilities, broadband expansion

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