

Received

MAY 15 2020

WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

2020-01

West Virginia Ethics Commission
 Attn: Lobbyist Registrar
 710 Brooks M. Ste. 100
 Charleston, WV 25301
 Tel: 558-0664 No faxed copies
 For office use only
 Postmark Return
 Days late Fee

Date reporting from (527 not business day past the due date (526) maximum)

1 Name and contact information

Name John S. Rainey, Jr. Phone 604-464-8636
 Business Address 6601 West Broad Street Business Email John.S.Rainey@Altra.com
 City, State Zip Richmond, VA 23230

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 _____ 4 _____
- 2 _____ 5 _____
- 3 _____ 6 _____

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

Tobacco Related Issues for Altra Client Services LLC and its Affiliates, Philip Morris USA Inc., John Middleton Co. and U.S. Smokeless Tobacco Co.

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