West Virginia Ethics Commission  
**Lobbyist Activity Report Form**  
2020-02

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

1. **Name and contact information**
   - **Name**: Alexander Macia  
   - **Business Address**: Spilman Thomas & Battle, PLLC  
     300 Kanawha Boulevard, East  
   - **City, State Zip**: Charleston, West Virginia 25301  
   - **Phone**: 304-340-3835  
   - **Business Email**: amacia@spilmanlaw.com

2. **Reporting period for which this activity report is being filed**
   - **Check**  
     - 2020-2  
   - **Period**: 5/1/20 - 8/31/20  
   - **Due Date**: 9/15/2020

3. **List all employers/organizations that you represent as a lobbyist**
   - 1. West Virginia Energy Users  
   - 2. Delta Dental  
   - 3. Maximus  
   - 4. American College of Cardiology  
   - 5. West Virginia State Medical Association  
   - 6. West Virginia Consumer Finance Association

4. **Lobbying activity summary - If there was no activity or expenditures, indicate “none.”**
   - Lobbying related to healthcare, energy and utilities, and consumer finance issues.

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**
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A. Meals and Beverages | $ | $ | $ | $ | $ | $ | $
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** | $ | $ | $ | $ | $ | $ | $

If you sponsored or contributed to any group event or shared expenses, list the total expended in category S6 immediately above. Complete and attach a Schedule B for each event.