West Virginia Ethics Commission

Lobbyist Activity Report Form

2017-01

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 _____

Days late ___

Rec'd____

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

1.	Name and contact information							
Name	Logie H. Bu	tcher		50%	Phono	304-543	3-7174	1
	^	icher				. 1 - 11		0 -
Addr	ess <u>PO Box 432</u>				Email _	IMPOIN	ostrat.	COM
	Pinch wy 2	5156					Read	
City	State Zip Pinch W	V 25151					Recei	ved
city,	State Zip 111CH W	0000	2				MAY	
							MAT 15	2017
	Reporting period for which thi		t is being filed			WV	Ethics Con	
Checl		Due Date					Con	imission
Х	2017-01 1/1/17-4/30/17	5/15/17				-		
							12.5	
								-
	List all employers/organization		·	ist	Us	e additional re _l	porting forms	if necessary.
	Children's Hone	Societuof	WV	4. Ph	armaceut	ical late	Manage	ment Associ
	Missingal Corne	ration		- Univ	Realhan	00-11-00	1110	The De
,	1. I TICLUSDEF SOLPE	Marion		5. <u>W v</u>	negrora	v Guego	3 4 Unive	isities As
						V		
	Microsoft Corpo wy Nurses Asso	ciction		6				
	B. WV Nurses 17550	ciation		6				
				ditures indicat	e "none "			
1. 1	obbying activity summary - If	there was no a	ctivity or expend				-	
1. 1		there was no a	ctivity or expend					
l. 1	obbying activity summary - If	there was no a	ctivity or expend				-	
l. 1	obbying activity summary - If	there was no a	ctivity or expend					
i. I	obbying activity summary - If	there was no a	ctivity or expend					
i. 1	obbying activity summary - If	there was no a	ctivity or expend					
i. I	obbying activity summary - If	there was no a s of clie	nts durin					
i. I	Expenditures expenditures, including campa	there was no a	ns, mark here:	g dinne	C	the amounts sp	ent in each of	the following
i. I	cobbying activity summary - If	there was no a	ns, mark here:	g dinne	diate family, list	the amounts sp	ent in each of	the following
i. I	expenditures, including campa	there was no a	ns, mark here:	g dinne	diate family, list	the amounts sp	ent in each of	the following
i. I	Expenditures expenditures, including campa spent money on any public offories per each employer you re	there was no a Sof che sign contribution ficial, employee present. Comp	ns, mark here: _ or member of helete and attach	is or her immee	diate family, list	·		Total Expended
i. I	Expenditures expenditures, including campa spent money on any public officies per each employer you re- inditure Categories	there was no a soft che soft c	ns, mark here: _or member of helete and attach	is or her immer Schedule A to t Employer 3	diate family, list his report. Employer 4	Employer 5	Employer 6	Total Expended
i. If no of fyour sategother. Experience: A. 3.	Expenditures expenditures, including campa spent money on any public off ories per each employer you re inditure Categories Meals and Beverages	there was no a S of che sign contribution ficial, employee epresent. Comp Employer 1	ns, mark here: or member of helete and attach Employer 2	is or her immer Schedule A to t Employer 3	diate family, list his report. Employer 4	Employer 5	Employer 6	Total Expended
i. I	Expenditures expenditures, including campa spent money on any public off ories per each employer you re inditure Categories Meals and Beverages Lodging	ign contribution ficial, employee epresent. Comp Employer 1 \$	ns, mark here: or member of helete and attach Employer 2	is or her immed Schedule A to t Employer 3 \$	diate family, list his report. Employer 4 \$	Employer 5 \$	Employer 6 \$	* 46.55
55. If for our categories Experies A. B. C. D.	Expenditures expenditures, including campa spent money on any public off ories per each employer you re inditure Categories Meals and Beverages Lodging Advertising	there was no a S OF Che iign contribution ficial, employee epresent. Comp Employer 1 \$ \$ \$	ns, mark here: or member of hete and attach Employer 2 \$ 46.55 \$	is or her immed Schedule A to t Employer 3 \$ \$	diate family, list his report. Employer 4 \$ \$ \$	Employer 5 \$ \$ \$	Employer 6 \$ \$ \$	* 44.55 \$
55. If no of f you catego Exper A. B. C. D.	Expenditures expenditures, including campa spent money on any public off ories per each employer you re diture Categories Meals and Beverages Lodging Advertising Travel	there was no a S OF Che iign contribution ficial, employee expresent. Comp Employer 1 \$ \$ \$ \$	ns, mark here: or member of helete and attach Employer 2 \$ 46.55 \$	is or her immer Schedule A to t Employer 3 \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$	Employer 5 \$ \$ \$ \$	Employer 6 \$ \$ \$ \$	Total Expended \$ 44.55 \$ \$ \$ \$
f you category. A. If no category. B. C. D. E. F.	Expenditures expenditures, including campa spent money on any public off ories per each employer you re diture Categories Meals and Beverages Lodging Advertising Travel Gifts	there was no a S OF Che ign contribution ficial, employee expresent. Comp Employer 1 \$ \$ \$ \$ \$	ns, mark here: or member of helete and attach Employer 2 \$ 46.55 \$	is or her immer Schedule A to t Employer 3 \$ \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$	Total Expended \$ 44.55 \$ \$ \$ \$ \$ \$
5. If no of you categ	expenditures expenditures, including campa spent money on any public off ories per each employer you re diture Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses	ign contribution ficial, employee expresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$	ns, mark here: _or member of helete and attach Employer 2 \$ 46.55 \$ \$ \$	is or her immer Schedule A to t Employer 3 \$ \$ \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expended \$ 44.55 \$ \$ \$ \$

6. Lobbyist certification – Please read and sign below.

To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is

Name:	Loane	H. Butcher	Date: 5	15/	17
				7	

Schedule A:	WV	Lobbyist	Expenditure	Details
-------------	----	----------	-------------	---------

(Attach this completed sheet to the Lobbyist Activity Report)

Received Complete this form if you have made or shared any expenditure other than group entertainment on a public official or employee during this reporting period. If you have made expenditures in these categories - (1) Meals & Beverages, (2) Loaging, (3) Travel, (4) Gifts, (5) Other Expenditures - list below, you must report it in sections 1 or 2 on this form.

If you shared any of these expenditures with another lobbyist, note who shared the expenditures in the area below the recipient's name. You are not required to report on Schedule A detailed expenditures on Advertising, Contributions [including political contributions] and Group Entertainment. Expenditures in those categories must be reported on the Lobbyist Activity Report and/or Schedule B.

1. Expenditure Details - (include shared expenditures not reported on Schedule B)

Report all expenditures in any of the categories listed below on a particular person or member of their immediate family EXCEPT those reported in Section 1a or 2 (below) or any portion of a "Group Entertainment" OR "Shared Expense" event which are to be reported on Schedule B. Transfer the totals to section 5 on the Lobbyist Activity Report. If you shared expenditures with another lobbyist, identify who shared the cost in the area below each recipient's name.

Recipient name(s) and date of expenditure	Meals &	Lodging	Travel	Gifts	Other	Total \$
	beverages					expended
Nancy Butcher	6.65					13/0/
Mark McOwer	6.85					73966
Fred Lewis	6.65					7396.6
Alice Chakmakian	6.35					738 10-10
matt Pauley	6.35					726 6.6
Grant White	6.65					9 606
Ham proportioned	0.65					739616
1				toke	2/	111

1a	Gifts	(Group))
----	-------	---------	---

Ordinarily gifts to individual legislators must not exceed \$25. Gifts such as key chains, mugs, and calendars given to ALL members of the House or Senate, the entire Legislature or to standing or joint committees must be listed here. Describe the item, to which group it was given and the total cost. You need not list each legislator who received the gift, only the name of the group. Transfer the total cost to the Lobbyist Activity Report, section 5E

Which group received the gift?	Total cost of gift(s)	
	0 14-7	

2. Participation in a Panel or Speaking Engagement

Report expenditures on a participation in a panel or s	articular person in peaking engageme	the categories ent. Transfer th	listed below w e totals to sect	hen such exp tion 5 on the	penditure was for the individu	ual's
Recipient name and event	Meals & beverages	Lodging	Travel	Gifts	Scheduled entertainment & other	Total \$ expended

3. Subjects of Lobbying

For each recipient identified in 1, 1a & 2 above, explain briefly the subjects of lobbying. List the individual or group recipient and
then the subject matter of the lobbying. Example: "Del. Joe Jones – Health Care" or "House Finance Committee - Environment."
, o and the second of the seco
House Finance Staff - Procurement