West Virginia Ethics Commission

Lobbyist Activity Report Form

Lobbyist certification - Please read and sign below.

2017-01

Received

MAY 15 2017

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

Postmark _____ Rec'd_

304-558-0664 No

Days late _____

No faxed copies

Fine ___

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

Name David M. Flannery Address PO Box 1588 City, State Zip Charleston, WV 25326 Phone (304) 353-8171 Email Dave.Flannery@Steptoe-Johnson.com	1. N	ame and contact information								
Address PO Box 1588 City, State Zip							Phone (304) 353-8171			
City, State Zip Charleston, WV 25326 2. Reporting period for which this activity report is being filed Check Report Period Due Date x 2017-1 1/1/17-4/30/17 5/15/2017 3. List all employers/organizations that you represent as a lobbylst Use additional reporting forms if necessary. 1. WV Chamber of Commerce 4, 2. 5. 3. 6. 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." None 5. Expenditures 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 Expenditure Categories Employer 1 Employer 2 Employer 3 Employer 6 Total Expended A. Meals and Beverages S S S S S S S S S Lodging S S S S S S S S S S S S C. Advertising S S S S S S S S S S S S S S S S S S S										
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4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." None 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 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ B. Lodging \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ C. Advertising \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ D. Travel \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ D. Travel \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ G. Gifts \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ F. Other Expenses \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ G. Group Expenditures \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ H. Campaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. Strown Source or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and										
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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