West Virginia Ethics Commission

SEP 14 2017

Lobbyist Activity Report Form

2017-02

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

Late re	porting fi	ne - \$10 per busi	ness day past	t the due date	(\$250 maxim	um)	Days late	riie	V
1. Na	ame and co	ntact information							
	J. Mark		, , , , , , , , , , , , , , , , , , ,			Phono	304-347-176	3	
							madkins@		com
Addres	s 600 Qua	arrier Street				Email _	maukinsw	DOWIESTICE	
City, St	ate Zip <u>C</u>	harleston, W	V 25301						
2. Re	porting pe	riod for which this	activity report	is being filed					
Check	Report	Period	Due Date						
X	2017-2	5/1/17-8/31/17	9/15/2017		Company of the compan	19 11 2 No.			
3. Li:	t all emplo	yers/organizations	s that you renr	esent as a lobb	vist		se additional rep	porting forms in	f necessary.
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		ices Company	/ EDIO DI					-61:6-0	
2.	Multista	te Associates	/ EPIC Pha	rmacies, Inc	5. We	st Virginia Ce	enter for End-	of-Life Care	
3.	Multistat	te Associates /	Sanofi Past	eur	6. <u>Cor</u>	nmunity Bank	ers of West V	irginia	
4. Lo	bbying acti	ivity summary - If t	here was no a	ctivity or exper	ditures, indicat	e "none."			
All of	the matte	ers and issues I	isted on the	emplover re	presentation	authorizatio	n form filed in	respect to	each of these.
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5. Ex	penditures								
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		y on any public offi					t the amounts sp	ent in each of	the following
		h employer you re						15	7.1.15
Expen	diture Categ		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.		Beverages	\$	\$	\$	\$	\$	\$	\$
В.	Lodging		\$	\$	\$	\$	\$	\$	\$
C.	Advertisin	g	\$	\$	\$	\$	\$	\$	\$
D.	Travel		\$	\$	\$	\$	\$	\$	\$
E.	Gifts		\$	\$	\$	\$	\$	\$	\$
F.	Other Exp		\$	\$	\$	\$	\$	\$	\$
G.		penditures	\$	\$	\$	\$	\$	\$	\$
Н.		Contributions			(PENDED" COLU		4		\$400.00
1.		all expenditures	\$	\$	\$	\$	\$	\$	\$ 400.00
		or contributed to a	ny group event	or snared expe	enses, list the to	tai expended in	category 5G imi	nediately abov	e. Complete and

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

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	ame and co								
Name	J. Mark	Adkins				Phone	304-347-176	8	
Addres	s <u>6</u> 00 Qu	arrier Street				_	madkins@		e.com
City, St	ate Zip C	Charleston, W	V 25301						
2. Re	eporting pe	riod for which this	activity report	t is being filed					
Check	Report	Period	Due Date						
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	<u></u>								
3. Li	st all emplo	yers/organizations	that you repr	esent as a lobb	yist	Us	e additional rep	porting forms i	f necessary.
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