Lobbyist certification - Please read and sign below.

AUG 2 1 2017 West Virginia Ethics Commission

Lobbyist Activity Report Formwethics Commission

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 No faxed copies 304-558-0664 For office use only: Postmark Rec'd\_

Late reporting fine - \$10 per business day past the due date (\$250 maximum)									
1. Name and contact information									
Name _ David McMahon									
Address 1624 Kenwood Rd Email wvdavid@wvdavid.net									
City, State Zip Charleston WV 25301									
2. Reporting period for which this activity report is being filed									
Check									
X	2017-2	5/1/17-8/31/17	9/15/2017						
3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.									
5. Elst diremple for specific									
1. Mountain State Justice 4									
2. W. Va. Surface Onwer's Rights Org									
36									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
Communicate with legislators and executive branch on intersts of surface owners and small mineral owners and on the intersts of low income persons as set out in my registration.									
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		\$	\$	\$	\$	\$	\$	\$
E.	Gifts		\$	\$	\$	\$	\$	\$	\$
F.	Other Expenses		\$	\$	\$	\$	\$	\$	\$
G.				MOUNT IN "TOTAL EXPENDED" COLUMN.					\$
H. 1.			\$ \$ \$			\$	\$	\$	\$
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.									

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 a violation of WV Code 68-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I