West Virginia Ethics Commission

1. Name and contact information

Lobbyist Activity Report Form 2017-02

SEP 2 2 2017

. VV Ethics Commission

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

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

201-212-1015

304-558-0664 No faxed copies For office use only:

Postmark 5 Days late_

| Name | ame JAMUEL H. MINARCI | | | | | Phone | | | | |
|---|--|----------------|-----------------|---------------|------------------------------------|------------|----------------|-----------------|-----------------|--|
| Addre | Name 1516 Kanawha Blvd., East | | | | sam.minardi@gmail.com | | | | | |
| Lillell | | | | | | | | | | |
| Charleston, WV 25311 | | | | | | | | | | |
| City, State Zip | | | | | | | | | | |
| | | | | | | | | | | |
| 2. R | . Reporting period 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 | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary. | | | | | | | | | | |
| | | | | | | | | | | |
| 1. | CHPA First Energy 7. Lumos Networks ExxonMobil General Motors 8. UTEC | | | | | | | | | |
| 2. | ζ. | | | | | | | | | |
| 3. | Longview Power | | | | 5/3 Bank 9. MillerCoors. 10. Appri | | | | 0. Appris | |
| | | | | | | | | | | |
| 4 Lobbying activity summany. If there was no activity or expanditures !-!! " | | | | | | | | | | |
| 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." Floatric power production oil 8 gas development processintion 8 ever the counter medications | | | | | | | | | | |
| Electric power production, oil & gas development, prescription & over the counter medications, | | | | | | | | | | |
| state Presciption Monitor Program, Tort reform 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. | | | | | | | | | | |
| Expen | diture Categories | Employer 1 | Employer 2 | Employe | r 3 Emp | oloyer 4 | Employer 5 | Employer 6 | Total Expended | |
| A. | Meals and Beverages | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| В. | Lodging | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| C. | Advertising | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| D. | Travel | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| E. | Gifts | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| F. | Other Expenses | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| G. | Group Expenditures | \$ | \$ | \$ | \$ | | \$ | \$ | \$ | |
| Н. | Campaign Contributions | | T IN "TOTAL EX | | | | | \$ | | |
| 1. | TOTAL of all expenditures | \$0 | \$ | \$ | \$ | | \$ | \$ | \$0 | |
| | sponsored or contributed to a | ny group event | or shared expen | nses, list th | e total expe | ended in c | ategory 5G imr | nediately above | e. Complete and | |
| attach a Schedule B for each event. | | | | | | | | | | |

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 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