West Virginia Ethics Commission

Received

Lobbyist Activity Report Form

SEP 13 2017

WV Ethics Commission

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

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

Postmark _____ Rec'd_____ Days late ____ Fine ____

1. Name and contact information											
Name Angel R. Moore						Phone 304-345-7330					
Address 106 Capitol Street							Email angel@moorefirmofcharleston.com				
						Email					
city, State Zip Charleston, WV 25301											
City, State Zip											
2 Poporting region for which this state of the state of t											
2. Reporting period for which this activity report is being filed Check Report Period Due Date											
x	2017-2	Period	Due Date								
X	2017-2	5/1/17-8/31/17	9/15/2017								
				-							
		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1									
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.											
1	1. United HealthCare Services, Inc. 4. Energy Transportation, LLC										
2	2. Urgent Care MSO, LLC aka MedExpress 5. Frontier Communications										
3. Optum, Inc. 6. FirstEnergy and 1-11 See page											
A Labbuing activity common Mahaman Mah											
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."											
None.											
5. Expenditures											
If no e	xpenditures,	including campai	gn contributio	ns, mark here:	1						
If you s	spent money	on any public offi	cial, employee	or member of	nis or her im	mediate :	family list t	he amounts sn	ent in each of t	the following	
catego	ries per each	employer you rep	resent. Comp	lete and attach	Schedule A	to this re	port.	ne amounts sp	ent in each or t	.ne rollowing	
Expenditure Categories			Employer 1	Employer 2			ployer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and I	Beverages	\$	\$	\$	\$		\$	\$	S	
B.	Lodging		\$	\$	\$	\$		\$	\$	\$	
C.	Advertising		\$	\$	\$	\$		\$	\$	\$	
D.	Travel		\$	\$	\$	\$		\$	\$	\$	
E.	Gifts		\$	\$	\$	\$		\$	\$	\$	
F.	Other Exper	nses	\$	\$	\$	\$		\$	\$	\$	
G.	Group Expe		\$	\$	\$	5		\$	\$	\$	
H.	Campaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$										
I.	TOTAL of all expenditures		\$	\$	\$	Ś		\$	ć	\$	
If you s							andad in an		3		
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.											

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 § 6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I may be fined, sentenced to jair or both