West Virginia Ethics Commission

Emailed Received

Lobbyist Activity Report Form

Lobbyist certification - Please read and sign below.

2017-03

304-558-0664 **NV Ethies Commission** For office use only: Postmark _____

Days late __

No faxed copies

Rec'd_

210 Brooks St., Ste. 300 Charleston, WV 25301

West Virginia Ethics Commission Attn: Lobbyist Registrar

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

Name and contact information									
Name Tracy Dawn Fath					Phone 304-637-3467				
Address 812 Gorman Avenue					Email fath.tracy@dhswv.com				
Address = 1.2 Comman / Worlds					Email 10		31,101,11		

City, State Zip Elkins, WV 26241									
2. Reporting period for which this activity report is being filed									
Check	Report Period	Due Date							
х	2017-3 9/1/17-12/31/17	1/15/2018					1		
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.									
_{1.} Davis Health System									
4,									
Zeasy Fath				5					
_{3.} Tracy Fath									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
none									
5. Expenditures									
If no expenditures, including campaign contributions, mark here:									
	spent money on any public off					the amounts sp	ent in each of	the following	
categories per each employer you represent. Complete and attach Schedule A to this report.									
	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
Α.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
B.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	\$	\$	\$	\$	\$	\$	\$	
Ε.	Gifts	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$	
Н.	Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$							
1.	TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$	
If you	sponsored or contributed to a	ny group event	or shared expe	enses, list the tot	al expended in o	ategory 5G imr	nediately abov	e. Complete and	
attach	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