West Virginia Ethics Commission

Lobbyist Activity Report Form

Lobbyist certification - Please read and sign below.

2017-01

MAY 15 2017

Received

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	Rec'd
Days late	Fine

	Name and contact informat	on						
Nai	me Bethanne Cooley				Phone 202-736-3200			
Address 1400 16th Street, NW					Email BCooley@ctia.org			
nui	Suite 600				_ Email_	2000109@00	4.019	
		0.0000			_			
City	, State Zip Washington, D	C 20036						
2.	Reporting period for which t	his activity repo	rt is being filed					
Che		Due Date						
х	2017-1 1/1/17-4/30/3	7 5/15/2017	7					
					A 10 10 10 10 10 10 10 10 10 10 10 10 10			
3.	List all employers/organizati	ons that you reg	resent as a lob	bvist	119	se additional re	norting forms	if necessary
	1. CTIA - The Wireless A							
	2			5				
	3.			6.				
4.	Lobbying activity summary -	If there was no	activity or over	nditures indicat	_ (/			
		there was no a	activity or expe	naitures, indicat	e none.			
No	ne.							

5.	Expenditures							
	Expenditures	aian contributio	ns mark here:	X				
If no	expenditures, including camp	aign contributio	or member of	his or her immed	Histo family list:	the amounts on	out in analy of	1 - C - U
<i>If no</i> If yo	expenditures, including camp u spent money on any public o	fficial, employee	or member of	his or her immed	diate family, list	the amounts sp	ent in each of	the following
If no	expenditures, including camp	fficial, employee	or member of	his or her immed Schedule A to t	his report.		1	
If no	expenditures, including camp u spent money on any public o gories per each employer you	fficial, employee represent. Comp	or member of plete and attach	his or her immed	his report. Employer 4	Employer 5	Employer 6	Total Expended
If no If you cates Expe	expenditures, including camp u spent money on any public o gories per each employer you enditure Categories	fficial, employee represent. Comp Employer 1	or member of plete and attach Employer 2	his or her immed a Schedule A to t Employer 3	his report. Employer 4	Employer 5	Employer 6	Total Expended
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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