

Lobbyist Activity Report Form

2017-01

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 _____

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

1. Name and contact information

Name Chris Hall
 Address PO Box 11847
 City, State Zip Charleston WV 25339

Phone 304-982-6050
 Email challwv@aol.com

2. Reporting period for which this activity report is being filed

Check	Report	Period	Due Date				
x	2017-01	1/1/17-4/30/17	5/15/17				

3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

- | | |
|---|--|
| 1. <u>EMS Coalition/WV</u> | 4. <u>Land of Canaan Vacation Resort</u> |
| 2. <u>Energy Transfer Partners</u> | 5. <u>West Virginia Aerospace Alliance</u> |
| 3. <u>Independent Waste Haulers & Recyclers</u> | 6. <u>DTE Energy</u> |

4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

emergency medical services, waste hauling, recycling, natural gas, infrastructure, taxation, general laws
timeshares, education, beer brewing

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. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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.

6. 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-2-9 to willfully and knowingly file a lobbyist activity report that is false or incomplete.

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Use additional reporting forms if necessary.

- 7 **1.** Quantum Utility Generation
 8 **2.** New Venture Fund
 9 **3.** WV Craft Brewers' Guild
4. _____
 5. _____
 6. _____

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emergency medical services, waste hauling, recycling, natural gas, infrastructure, taxation, general laws
 timeshares, education, beer brewing

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 7	Employer 8	Employer 9	Employer 4	Employer 5	Employer 6	Total Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$ 0	\$ 0	\$ 0	\$	\$	\$	\$

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.

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