West Virginia Ethics Commission

Lobbyist Activity Report Form

Lobbyist certification - Please read and sign below.

WV Ethics Commission

Received

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:

Rec'd

Fine

Postmark_

Days late

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

1. Name and contact information									
Name Cody A. Starcher Phone 304-366-99									989
Address 44 Cody Lane Email Starcher44 OCOMCOSTENOT									
City, State Zip Fair Mant, WV 26554									
	Reporting period for which this activity report is being filed								
Check	Report	Period	Due Date						
Х	2017-1	1/1/17-4/30/17	5/15/2017						
	-		+						
	1								
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.									
1. Altria Client Services Lloyd Ffilates									
2 Ind. Colleges+ Schools assoc 5.									
3.									
A Labbida and the common lifetime and the common difference of the comm									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
Tobacco tax + other Concerns									
Education									
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.									
						T	15 1 5	I = 1 = 6	
	diture Categ		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.		Beverages	\$	\$	\$	\$	\$	\$	\$
B.	Lodging		\$	\$	\$	\$	\$	\$	\$
C.	Advertisin	g	\$	\$	\$	\$	\$	\$	\$
D.	Travel		\$	\$	\$	\$	\$	\$	\$
E.	Gifts		\$	\$	\$	\$	\$	\$	\$
F.	Other Exp		\$	\$	\$	\$	\$	\$	\$
G.		7		\$	\$	\$	\$	\$	\$
Н.		Campaign Contributions LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. TOTAL of all expenditures \$ \$ \$ \$ \$					1		\$
1.			\$	\$	\$	\$	\$	\$	\$
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.									

To the best of my knowledge, the information contained bereon and on any attached materials is true, correct and complete. Lunderstand that it is