West Virginia Ethics Commission

Name and contact information

Address 300 Kanawha Boulevard, East

Lobbyist certification - Please read and sign below.

Name Alexander Macia

Lobbyist Activity Report Form SEP 18 2017

2017-02

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 Rec'd Fine

Phone 304-340-3835

Email amacia@spilmanlaw.com

City, State Zip Charleston, West Virginia 25301											
2. Reporting period for which this activity report is being filed											
Check	Report	Period	Due Date		a de la con		(2)				
х	2017-2	5/1/17-8/31/17	9/15/2017				10000				
							1000000				
3. Lis	3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.										
· · · · · · · · · · · · · · · · · · ·	Coalition for Sound Unclaimed Property					4. Maximus 7. BJ Alan Company					
	2. West Virginia Energy Users					5. Delta Dental					
						6. Caresource Management					
3.	Alecto Healthcare Services						6. Caresource Management				
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."											
Engaged in lobbying activities relating to subject matters of healthcare, insurance law, healthcare regulation, and energy regulation.											
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.											
			Employer 1	Employer 2	Employ		Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and		\$	\$	\$		\$	\$	\$	\$	
B.	Lodging		\$	\$	\$		\$	\$	\$	\$	
C.	Advertising	2	\$	\$	\$		\$	\$	\$	\$	
D.	Travel		\$	\$	\$		\$	\$	\$	\$	
E.	Gifts		\$	\$	\$		\$	\$	\$	\$	
F.	Other Expe	enses	\$	\$	\$		\$	\$	\$	\$	
G.	Group Expe	enditures	\$	\$	\$		\$	\$	\$	\$	
H.	Campaign	Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$						\$		
I.	TOTAL of a	OTAL of all expenditures \$ \$		\$		\$	\$	\$	\$		
If you s	ponsored or	r contributed to any	group event	or shared exper	nses, list t	he tot	al expended in c	ategory 5G imn	nediately above	e. Complete and	
attach a Schedule B for each event.											