West Virginia Ethics Commission

Lobbyist Activity Report Form

6. Lobbyist certification - Please read and sign below.

2017-01

West Virginia Ethics Commission
Attn: Lobbyist Registrar
210 Brooks St., Ste. 300
Charleston, WV 25301
304-558-0664 No faxed copies
Far office use only:

For office use only:
Postmark Rec'd Days late Fine

					17	201 000 717	^	
Nam	Name Bruce R. Martin					Phone 304-288-7179		
Addr	Address 821 Mount Zion Road				Email 8	armchp17@aol.com		
Auui				and the second of the second o	- PARTICULAR CON			
Clty,	State Zip Fairmont, WV 26	3554						
2.	Reporting period for which this	s activity repor	t is being filed					
Chec		Due Date			emment.			
1	The second secon	7 5777-7						
X	2017.02 5/1/12-8/31	A 9/15/14						10 1 apr 20 p - 4 2
3.	List all employers/organization	s that you repr	resent as a lobb	yist	Us	e additional re	orting forms i	necessary.
	1. WV Confederation of Cl	lubs		4				
	2.			5.				
				,				
	3							
		(MV) - A						
	Lobbying activity summary - if	(MV) - A						
	Lobbying activity summary - If	(MV) - A						
4.	Lobbying activity summary - If	(MV) - A						
4.	Lobbying activity summary - If	(MV) - A						
4.	Lobbying activity summary - If	(MV) - A						
4. Nor	Lobbying activity summary - if	there was no a	ctivity or expen	iditures, indicat				
4. Nor	Lobbying activity summary - if Expenditures expenditures, including campa	there was no a	ctivity or expen	oditures, indicat	e "none."			
4. Nor 5. If no	Lobbying activity summary - if Expenditures expenditures, including campa	there was no a	ens, mark here:	his or her Immed	e "none."		ent in each of t	the following
4. Nor 5. If no	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re	there was no a	ctivity or expen	his or her Immed	e "none."		ent In each of t	the following Total Expende
5. If no categorial Expenses	Expenditures expenditures, including campa spent money on any public of sories per each employer you re nditure Categories	there was no a	ons, mark here: or expensions, mark here: or member of lolete and attach	his or her Immed Schedule A to t	e "none." diate family, list his report.	the amounts sp		
5. If no lf you category Expe	Expenditures expenditures, including campa spent money on any public of sories per each employer you re nditure Categories Meals and Beverages	there was no a	ons, mark here: or ember of lolete and attach Employer 2	his or her Immed Schedule A to t Employer 3	diate family, list his report. Employer 4	the amounts sp	Employer 6	Total Expende
5. If no cates Expe A. B.	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re inditure Categories Meals and Beverages Lodging	there was no a	ons, mark here: or emmber of lolete and attach Employer 2	his or her Immed Schedule A to t	diate family, list his report.	the amounts sp Employer 5	Employer 6	Total Expende
5. If no category Expe A. B.	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re inditure Categories Meals and Beverages Lodging Advertising	there was no a	ens, mark here: or member of lolete and attach Employer 2 \$ \$	his or her Immed Schedule A to t Employer 3 \$	dilate family, list his report. Employer 4 \$ \$ \$	the amounts sp Employer 5 \$	Employer 6 \$	Total Expende \$
5. If no if you category Expe A. B. C. D.	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re inditure Categories Meals and Beverages Lodging Advertising Travel	algn contribution ficial, employer 1 \$ \$ \$ \$ \$ \$	ens, mark here: or member of bolete and attach Employer 2 \$ \$ \$ \$	his or her Immed Schedule A to t Employer 3	diate family, list his report. Employer 4 \$	the amounts sp Employer 5 \$ \$ \$	Employer 6 \$ \$ \$	Total Expende \$ \$ \$
5. If no Category Experiments C. D. E.	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re inditure Categories Meals and Beverages Lodging Advertising Travel Gifts	algn contribution ficial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$	ens, mark here: or member of lolete and attach Employer 2 \$ \$ \$ \$ \$	his or her Immed Schedule A to t Employer 3 \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$	the amounts sp Employer 5 \$ \$ \$ \$	Employer 6 \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$
5. If no Category B. C. D. E.	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re inditure Categories Meals and Beverages Lodging Advertising Travel Gifts Other Expenses	algn contribution ficial, employer 1 \$ \$ \$ \$ \$ \$	ens, mark here: or member of bolete and attach Employer 2 \$ \$ \$ \$	his or her Immed Schedule A to t Employer 3 \$ \$ \$	dlate family, list his report. Employer 4 \$ \$ \$ \$ \$	the amounts sp Employer 5 \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$
5. If no Category Experiments C. D. E.	Expenditures expenditures, including campa spent money on any public of gorles per each employer you re inditure Categories Meals and Beverages Lodging Advertising Travel Gifts	sign contribution ficial, employee epresent. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$	ens, mark here: or member of lolete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$	his or her Immed Schedule A to t Employer 3 \$ \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$ \$ \$ \$	the amounts sp Employer 5 \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

To the best of my knowledge, we offermation cognained ere of any on any attachant particles is true, correct and complete. I understand that it is a violation of WV Code \$68-30 willifully and wowlness file fail for it complete report. I further understand that if convicted of such an act, I