## Received

West Virginia Ethics Commission

Name and contact information

Address Brennan Center for Justice

Name Jonathan Brater

## JAN 11 2013

## Lobbyist Activity Report Form Ethics Commission

2017-03

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 \_\_\_\_ Days late \_

Phone 646-292-8310

Email braterj@brennan.law.nyu.edu

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

| 120 Broadway, Suite 1750  |   |            |  |                              |            |            |            |                |  |
|---|---|------------|--|------------------------------|------------|------------|------------|----------------|--|
| City, State Zip New York, NY 10271  |   |            |  |                              |            |            |            |                |  |
| City/State Lip  |   |            |  |                              |            |            |            |                |  |
| 2 Description and of the state |   |            |  |                              |            |            |            |                |  |
|   | 2. Reporting period for which this activity report is being filed  Check Report Period Due Date                 |            |  |                              |            |            |            |                |  |
| х   | 2017-3 9/1/17-12/31,  |            |  |                              | 3 24       |            | ~          |                |  |
|   | 2017-3 3/1/17-12/31   | 1/13/2018  |  |                              |            |            |            |                |  |
|   |   |            |  |                              |            |            |            |                |  |
|   |   |            | NAME OF TAXABLE AND ASSESSED.              | SELECTION OF THE PROPERTY OF | 2362435757 |            |            |                |  |
|   | List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary. |            |  |                              |            |            |            |                |  |
| 1. Brennan Center for Justice   |   |            |  |                              |            |            |            |                |  |
| 2. 5.   |   |            |  |                              |            |            |            |                |  |
| ۷.  |   |            |  |                              |            |            |            |                |  |
| 3.  | 36  |            |  |                              |            |            |            |                |  |
|   |   |            |  |                              |            |            |            |                |  |
| 4. Lo   | 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."                       |            |  |                              |            |            |            |                |  |
| none  |   |            |  |                              |            |            |            |                |  |
|   |   |            |  |                              |            |            |            |                |  |
|   |   |            |  |                              |            |            |            |                |  |
|   |   |            |  |                              |            |            |            |                |  |
|   |   |            |  |                              |            |            |            |                |  |
| 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.  |   |            |  |                              |            |            |            |                |  |
|   | iture Categories  | Employer 1 | Employer 2                                 | Employer 3                   | Employer 4 | Employer 5 | Employer 6 | Total Expended |  |
| Α.  | 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. \$ |                              |            |            |            |                |  |
| 1.  | TOTAL of all expenditures   |            | \$   | \$                           | \$         | \$         | \$         | \$             |  |
| 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 Johnuist cartification Diagrams and and sign below  |   |            |  |                              |            |            |            |                |  |
| 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