West Virginia Ethics Commission

Lobbyist Activity Report Form JAN 02 2013

Lobbyist certification - Please read and sign below.

2017-03

Received

WV Ethics Coo ission

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

Late reporting fine - \$10 per business day past the due date (\$250 maximum)										
1. Name and contact information										
Name David McMahon Phone 304-993-0468										
Address 1624 Kenwood Rd							Email wvdavid@wvdavid.net			
Address 1027 Rollwood Rd						Email <u>v</u>	Email WVdaVid WVdaVid.Tiet			
City, State Zip Charleston, WV 25314										
2. Reporting period for which this activity report is being filed										
Check										
х	2017-3	9/1/17-12/31/17	1/15/2018							
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.										
Mountain State Justice										
Wort Virginia Curface Oursella Diabta Ora										
West Virginia Surface Owner's Rights Org. 5.										
3										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
Attended interims and advocated on issues stated in lobbyist registration.										
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.										
Expend	diture Categ		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and	Beverages	\$	\$	\$	\$	\$	\$	\$	
B.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	g	\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expe	enses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Exp		\$	\$	\$	\$	\$	\$	\$	
Н.		Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$500						\$ 500	
I.		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	attach a Schedule B for each event.									