West Virginia Ethics Commission

Name and contact information

Name William McManus

Lobbyist Activity Report Form

Lobbyist certification - Please read and sign below.

- FUNCE-1- FCR 2 0 to - 115 lb - - - 1 to - - 1 to - - 5 lo - - 5 lo - - 1 to - - 1

2017-02

Received

JAN 16 2013

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

West Virginia Ethics Commission Attn: Lobbyist Registrar

210 Brooks St., Ste. 300 Charleston, WV 25301

No faxed copies

304-558-0664 For office use only:

Phone (415) 389-6800

Postmark _____ Rec'd___ Days late _

Address C/O 2350 Kerner Blvd., Ste. 250					Email aba@nmgoviaw.com			
City, State Zip San Rafael, CA 94901								
City, State Zip Carr Naraer, CA 34301								
2. Reporting period for which this activity report is being filed								
Check	Report Period	Due Date	The age of the second					
x	2017-3 9/1/17-12/31/	17 1/15/2018						
			电影影响的					
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.								
1. American Beverage Association 4.								
2 5								
3								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
None this period								
,								
P P								
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.								
	liture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.	Meals and Beverages	\$0.00	\$	\$	\$	\$	\$	\$ 0.00
В.	Lodging	\$0.00	\$	\$	\$	\$	\$	\$0.00
C.	Advertising	\$0.00	\$	\$	\$	\$	\$	\$ 0.00
D.	Travel	\$0.00	\$	\$	\$	\$	\$	\$ 0.00
E.	Gifts	\$0.00	\$	\$	\$	\$	\$	\$ 0.00
F.	Other Expenses	\$0.00	\$	\$	\$	\$	\$	\$ 0.00
G.	Group Expenditures	\$0.00	\$	\$	\$	\$	\$	\$0.00
H.	Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. \$0.00						
1.	TOTAL of all expenditures	\$ 0.00	\$	\$	\$	\$	\$	\$0.00
If you s	ponsored or contributed to	any group event	or shared expe	nses, list the tot	al expended in c	ategory 5G imn	nediately above	. Complete and
attach a Schedule B for each event.								

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