

Lobbyist Activity Report Form

2017-03

Received

JAN 17 2018

WV Ethics Commission

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 1/15/18 Rec'd 0
Days late 0 Fine 0

OK

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

1. Name and contact information

Name Herschel Rose Phone 304-342-5050
 Address P.O. Box 3502 Email herschelrose@roselawwv.com
 City, State Zip Charleston, WV 25335

2. Reporting period for which this activity report is being filed

| Check | Report | Period | Due Date | | | | |
|-------|--------|-----------------|-----------|--|--|--|--|
| x | 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.*

1. State Farm Ins. 4. _____
 2. _____ 5. _____
 3. _____ 6. _____

4. Lobbying activity summary - If there was no activity or expenditures, indicate "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.

| Expenditure Categories | Employer 1 | Employer 2 | Employer 3 | Employer 4 | Employer 5 | Employer 6 | Total Expended |
|------------------------------|---|------------|------------|------------|------------|------------|----------------|
| A. Meals and Beverages | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| B. Lodging | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| C. Advertising | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| D. Travel | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| E. Gifts | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| F. Other Expenses | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| G. Group Expenditures | \$ 0 | \$ | \$ | \$ | \$ | \$ | \$ |
| H. Campaign Contributions | LIST AMOUNT IN "TOTAL EXPENDED" COLUMN. | | | | | | \$ 100.00 |
| I. TOTAL of all expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ 100.00 |

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. 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 a violation of WV Code §6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I