West Virginia Ethics Commission

Lobbyist Activity Report Form

2018-01

Received

MAY 1 4 2018

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: Rec'd_

Days late

W Ethics Commission Postmark __

Late reporting fine -	\$10 per business d	lay past the due date ((\$250 maximum)
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Late reporting Jine - \$10 per business day past the due date (\$250 maximum)											
1. Na	ame and contact information										
Name	me Andrew Corsig					Phone 513-766-6514					
Addres	Address 201 E. Fifth Street				Email a	Email acorsig@phrma.org					
Addies	Suite 1900										
	Cincinnati Ohio 45202										
City, State Zip Christinian, Offic 43202											
2. Reporting period for which this activity report is being filed											
Check	Report Period	Due Date	,	3 -11	TENT !						
ж	2018-1 1/1/18-4/30/18	5/15/2018									
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.											
1.	Pharmaceuticals Research and	Manufacturers	of America (PhR	MA) 4							
2.				5.							
3.											
4. Lo	bbying activity summary - If t	here was no a	ctivity or expen	ditures, indicate	"none."						
Nor				,							
1401	16										
5. Ex	penditures										
	xpenditures, including campai	an contributio	ns, mark here:	V							
	pent money on any public offi			nis or her immed	liate family, list t	he amounts sp	ent in each of t	he following			
catego	ries per each employer you re	present. Comp	lete and attach	Schedule A to th	nis report.						
Expen	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended			
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$			
B.	Lodging	\$	\$	\$	\$	\$	\$	\$			
C.	Advertising	\$	\$	\$	\$	\$	\$	\$			
D.	Travel	\$	\$	\$	\$	\$	\$	\$			
E.	Gifts	\$	\$	\$	\$	\$	\$	\$			
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$			
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$			
H.	Campaign Contributions	LIST AMOUN	T IN "TOTAL EX	PENDED" COLU	MN.			\$			
l.	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.											

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 may be fined centenced to iail or both