

Lobbyist Activity Report Form

2018-02



Received
SEP 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 _____ Rec'd _____
 Days late _____ Fine _____

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

1. Name and contact information

Name Tamera Brown Phone (415) 389-6800
 Address c/o 2350 Kerner Blvd., Ste. 250 Email Tami.Brown@Merck.com
 City, State Zip San Rafael, CA 94901

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

| Check | Report | Period | Due Date |
|-------|--------|----------------|-----------|
| x | 2018-2 | 5/1/18-8/31/18 | 9/17/2018 |
| | | | |
| | | | |

3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

1. Merck Sharp & Dohme Corp.
2. _____
3. _____
4. _____
5. _____
6. _____

4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

Health Care, Pharmaceuticals, Contraception, Immunization, Medicaid.

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 | \$ | \$ | \$ | \$ | \$ | \$0 |
| B. Lodging | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |
| C. Advertising | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |
| D. Travel | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |
| E. Gifts | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |
| F. Other Expenses | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |
| G. Group Expenditures | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |
| H. Campaign Contributions | <i>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</i> | | | | | | \$0 |
| I. TOTAL of all expenditures | \$0 | \$ | \$ | \$ | \$ | \$ | \$0 |

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 may be fined, sentenced to jail or both.

Lobbyist Signature:  Date: 9/15/18