

West Virginia Ethics Commission
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 Rachel Coffman Phone (304) 345-1161
 Address 1210 Kanawha Blvd. East Email rachelcoffman@tsgsolution.com
 City, State Zip Charleston WV 25301

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. <u>Toyota Motor North America</u>	4. <u>Motion Picture Assoc. of America</u>
2. <u>DOW Chemical Company</u>	5. <u>WV Assoc. of Local Health Depts.</u>
3. <u>Entertainment Software Assoc.</u>	6. <u>Kinder Morgan</u>

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

Transportation/Budget/Taxation informational meetings. No certain issue.

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	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	<i>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</i>						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$0.00

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 may be fined, sentenced to jail or both.

Lobbyist Signature: *Rachel Coffman* Date: 09/15/18

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3. List all employers/organizations that you represent as a lobbyist *Use additional reporting forms if necessary.*

1. Vertex Pharmaceuticals 4. _____
 2. WV Veterinary Medical Assoc. 5. _____
 3. WV Osteopathic Medical Assoc. 6. _____

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

TBudget/Healthcare

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	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$0.00

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.

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Lobbyist Signature: Date: 09/18/18