## **West Virginia Ethics Commission**

## **Lobbyist Activity Report Form** 2018-02

Received

SEP 12 2018

**NY Ethics Commission** 

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

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

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For office use only:

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1. ACT, Inc.	San Rafael, CA 94901	dress c/o 2350 Kerner Blvd., Ste. 250					
Address c/O 2350 Kerner Blvd., Ste. 250  Email act@nmgovlaw.com  Email act@nmgovlav.com  Email act@nmg	San Rafael, CA 94901	dress c/o 2350 Kerner Blvd., Ste. 250	Phone (	415) 389-68	00		
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. ACT, Inc. 4. 2. 5. 3. 6.  4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."  None  5. Expenditures If no expenditures, including campaign contributions, mark here: If you spent money on any public official, employer or member of his or her immediate family, list the amounts spent in each of the followin categories per each employer you represent. Complete and attach Schedule A to this report.  Expenditure Categories Period Schedule Schedule A to this report.  Expenditure Categories Schedule	Reporting period for which this activity report is being filed  eck Report Period Due Date 2018-2 5/1/18-8/31/18 9/17/2018  List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.  1. ACT, Inc. 4. 2. 3. 6.  Lobbying activity summary - If there was no activity or expenditures, indicate "none."  One  Expenditures  no expenditures, including campaign contributions, mark here:  V ous spent money on any public official, employee or member of his or her immediate family, list the arrounts spent in each of the following tegories per each employer you represent. Complete and attach Schedule A to this report.  penditure Categories  Employer 1 Employer 2 Employer 3 Employer 4 Employer 5 Total Expended  Meals and Beverages 50 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5						
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