West Virginia Ethics Commission

Lobbyist Activity Report Form SEP 07 2018

2018-02

✓ Ethics Commission

Received

te renorting 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
304-558-0664 No faxed copies
For office use only:
Postmark Rec'd________
Days late Fine

Late r	Late reporting fine - \$10 per business day past the due date (\$250 maximum)											
1. Name and contact information												
Name	William	M. Swann				Phone 304-345-8900						
		irginia Street,	East			Email wswann@kaycasto.com						
Auure	Address 707 Virginia Street, East Suite 1500											
	Domo 4 - 5 2											
City, State Zip Charleston, WV 25301												
	Reporting period for which this activity report is being filed											
Check x	Report 2018-2	Period 5/1/18-8/31/18	9/17/2018				_					
	2010 2	3/1/10 0/31/10	3/11/2010									
3. Li	3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.											
-	1. WV Beverage Association 4. WV Association of Nurse Anesthetists											
				11.2		5. Hundred Resources						
3.	Express	Scripts Holding	Company		6. Mer	CK						
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none." All issues effecting economic development, recycling, health, public safety, telecommunications, surveying, technology, oil & gas energy, financial, gaming and other general issues 5. Expenditures												
	-	, including campai	an contributio	ns. mark here:	V							
		y on any public offi				diate family, list t	he amounts sp	ent in each of t	the following			
catego	ries per eac	h employer you re	oresent. Comp	olete and attach	Schedule A to t	his report.						
Expend	nditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended			
A.		Beverages	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
В.	Lodging		\$0	\$0	\$0	\$0	\$0	\$0	\$0			
C.	Advertising	g	\$0 \$0	\$0	\$0 \$0	\$0	\$0	\$0	\$0			
D. E.	Travel Gifts		\$0	\$0	\$0	\$0	\$0	\$0 \$0	\$0			
F.	Other Expe	ansas	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
G.	Group Exp				\$0	\$0	SO	\$0	\$0			
Н.		Contributions			PENDED" COLU				\$0			
i.		all expenditures	\$ 0	\$0	\$0	\$0	\$0	\$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 §68-3-9 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:												

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Address 707 Virginia Street, East						Email wswann@kaycasto.com					
Addres					cmail						
	Suite 1500 Page 2 of 2										
City, State Zip Charleston, WV 25301											
2. Re	2. Reporting period for which this activity report is being filed										
Check	Report Period	Due Date	****								
х	2018-2 5/1/18-8/31/18	9/17/2018									
								_			
			4								
	st all employers/organization		resent as a lobb	yist	Use	e additional re	porting forms i	f necessary.			
	Verizon Communication	าร		4							
Z.	The Health Plan			5							
э.											
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."											
	ssues effecting econ					safety tele	scommuni				
							COMMUNIC				
surve	ying, technology, oil & g	as energy, fi	nancial, gam	ing and other	general issue	S					
	penditures										
	spenditures, including campo spent money on any public of				dista familia liet i	tha amaunte en	ant in each of	the following			
	pent money on any public of ries per each employer you r					ine amounts sp	ent in each or	the following			
ļ — — —	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended			
A.	Meals and Beverages	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
В.	Lodging	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
C.	Advertising	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
D.	Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
Ε.	Gifts	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
F.	Other Expenses	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
G.	Group Expenditures	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
Н.	Campaign Contributions	LIST AMOUN	IT IN "TOTAL E)	(PENDED" COLU	MN.	WITT DAME		\$0			
1.	TOTAL of all expenditures	\$ 0	\$0	\$0	\$0	\$0	\$0	\$0			
	sponsored or contributed to	any group event	or shared expe	enses, list the tot	al expended in c	ategory 5G imr	nediately above	e. 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											
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may be	e fined, sentenced to jail or o	oth.	€ // =_1 ==50				9-7	7-18			
Lobbyist Signature: Date:											
		. /	(3)								