West Virginia Ethics Commission

Lobbyist Activity Report Form

2018-01

Received

MAY 0 9 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: Postmark _____

Days late _

Rec'd_____

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

1. Name and contact information										
Name Bosy Johnson						Phone (d4-519-313/				
0.1						email ichoscobé treatment				
1. Name and contact information Name Bosy Johnson Address 2001 Hardscrabble Rd Email Johnsonb & treatment advacacycenter, org										
						0	iavaca	CACCO	101,009	
City, St	ate Zip _/	Hexandri	ia, CH	430	001					
2. Re	norting ng	ried for which this a	ctivity report	is being filed						
Check	Reporting period for which this activity report is being filed k Report Period Due Date									
X	2018-1	1/1/18-4/30/18	5/15/2018							
	2020									
						2360752	1			
2 13	List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.									
3. List all employers/organizations that you represent as a housest. Treatment Advacacy (cotter 4.										
1. Weart Collection										
25										
36										
3.										
			_		Attack in disease	"				
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
none										
							2001			
5. E	xpenditures	S			X					
If no e	xpenditure	s, including campaig	gn contributio	ns, mark here:		line family list t	ho amounte en	ent in each of t	he following	
If you	spent mone	ey on any public office	cial, employee	or member of	his or her immed	nate rammy, use t	ne amounts sp	en areaciron	312 10110411118	
categories per each employer you represent. Complete and att					Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
Expenditure Categories			Employer 1	Employer 2		\$	\$	\$	\$	
A.	Meals and Beverages		\$	\$	\$	\$	\$	\$	\$	
В.	Lodging		\$	\$	\$		\$	\$	\$	
C.	Advertising		\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses		\$	\$	\$	\$	Ś	\$	\$	
G.	Group Expenditures		\$	\$) \$	T	13		\$	
H.		Campaign Contributions			KPENDED" COLU	Ś	Ś	\$	Ś	
1.	I. TOTAL of all expenditures		\$	\$	\$				7	
If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and										
attac	n a Schedule	B for each event.								
6. Lobbyist certification – Please read and sign below.										
								1	ndoretand that it is	
To th	e best of my	knowledge, the inf	ormation cont	tained hereon a	nd on any attach	ned materials is t	rue, correct and	d complete. I u	Inderstand that it is	
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 at on both. Date: May 7, 2018										
1										
Lable	ylst Signatu	ro (94 /	11192	-			Date:	May 1	2010	