## West Virginia Ethics Commission

## Received

## Lobbyist Activity Report Formal 15 2018

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

2018-01

VY Ethice Germission

210 Brooks St., Ste. 300 Charleston, WV 25301 No faxed copies 304-558-0664

For office use only:

West Virginia Ethics Commission Attn: Lobbyist Registrar

Days late \_\_\_\_\_

Rec'd\_\_\_\_

1. N	ame and cor	tact information					nours a nazar	millional	
Name Joe Letnaunchyn						Phone (	304) 344-9744		
Address West Virginia Hospital Association						Email jos	elet@vha.org		
vaoi c	7	sociation Dri				-			
City, S	tate Zip <u> </u>	harleston, W	V 20011						
		iod for which this	activity conoct	ic bains filed					
2. R Check		Period	Due Date	15 Deing med			1	April March U	
X	2018-1	1/1/18-4/30/18	5/15/2018	1 1					
	1000			Ì					
3. L	ist all emplo	yers/organizations	that you repr	esent as a lobb	yist	Use	additional rep	orting forms ij	necessary.
1	West Vi	rginia Hospit	al Associa	tion	4.				
									-
3					6				
4. L	obbying acti	vity summary - If t	here was no a	ctivity or expen	ditures, indicate	e "none."			
			incre was wear	centry or anjudi					
Hos	spitals &	Healthcare							
	expenditures					-14			
If no	expenditures <b>expenditures</b>	, including campai	gn contributio	ns, mark here:			ways must therepresents		
If you	spent mone	y on any public offi	icial, employee	or member of	his or her immed	diate family, list	the amounts sp	ent in each of i	the following
categ	ories per eac	h employer you re	present. Comp		Schedule A to t		,		
Exper	nditure Categ	ories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expende
A.	Meals and	Beverages	\$ 27.10	\$	\$	\$	\$	\$	\$ 27.10
В.	Lodging		\$	\$	\$	\$	\$	\$	\$
C.	Advertisin	g	\$	\$	\$	\$	\$	\$	\$
D.	Travel		\$	\$	\$	\$	\$	\$	\$
٤.	Gifts		\$	\$	\$	1 \$	Š	\$	\$
F.	Other Exp		\$	\$	\$	\$	\$	5	\$
G.		enditures	\$ 570.45	\$	\$	\$	S	\$	\$ 570.46
Н.		Contributions			KPENDED" COLU				\$
1.	TOTAL of	all expenditures	\$ 597.56	\$	\$	\$	\$		\$ 597.56
		or contributed to a	ny group event	or shared expe	inses, list the tot	tal expended in o	ategory 5G imi	mediately abov	e. Complete and
attac	h a Schedule	B for each event.							multiplicative receipts to the state of the
-	Lobbulet cost	ification – Please i	ead and sign I	nelow	and an experience of the second of the secon				
						space west the parameters, while it			
To th	e best of my	knowledge, the inf	formation cont	ained hereon a	nd on any attach	ned materials is t	rue, correct an	d complete. I u	nderstand that i
no di	lation of MM	Code § 6B-3-9 to w	ilifully and kno	wingly file a fal	se or incomplete	e report. I furthe	er understand ti	hat if convicted	of such an act.
		tenced to jail or bo							
		2	1	crundas				5/10/2018	
	yist Signatur		man Later Later	A Sail			M-4 i	n iurzuio	

Schedule A: WV Lot (Attach this completed sheet								
Complete this form if you had during this reporting period. Gifts, (5) Other Expenditures	If you have mad	de expenditures	in these categ	ories - (1) ۸	Aeals & Bev	on a public erages, (2) t	official o odging,	or employee (3) <i>Travel,</i> (4)
If you shared any of these ex name. You are not required contributions] and Group En Schedule B.	to report on Sch tertainment. Ex	edule A detaile penditures in th	d expenditures ose categories	on Adverti must be re	sing, Contri ported on t	butions [incl	uding p	olitical
1. Expenditure Details Report all expenditures in ar those reported in Section 1a	y of the categor	ies listed below	on a particular	person or	member of	their immed	liate far	nily EXCEPT
reported on Schedule B. Tra lobbyist, identify who shared	nsfer the totals t	to section 5 on t	he Lobbyist Ac	tivity Repo				
Recipient name(s) and date	of expenditure	Meals & beverages	Lodging	Travel	Gifts	Other	Tota expe	l \$ ended
Ted Cheatham 3/13 Mike Hall 4/27/20		16.84						16.84
TOTAL Expendit	шгде	27,10					-	27.10
1a Gifts (Group)							ik : : : -	
of the House or Senate, the of group it was given and the to Transfer the total cost to the Describe the gift(s)	ed not list each	legislator who n 5E.	slator who received the gif		ft, only the name of the gr			
2. Participation in a Pa				hen such e	xpenditure	was for the	individu	al's
participation in a panel or sp	-	-			•			
Recipient name and event	Meals & beverages	Lodging	Travel	Gifts		Scheduled entertaine & other		Total \$ expended
3. Subjects of Lobbying								
For each recipient identified then the subject matter of the								
"Ted Cheatham - Health Care",	Mike Hall - Health	Care"			*			
		nen awar						

Name: Joe Letnaunchyn

\_\_\_\_\_\_<sub>Date:</sub> 5/10/2018

Schedule B: Group Entertainment & Shared Expenses (Attach to the Lobbyist Activity Report)
Instructions: Group Entertainment functions include only the functions that fall within the following groups. Report expenditures for a dinner party, reception or other similar function if you invited ALL members of any of these four specific groups. Individual names of attendees do not need to be listed for these four specific groups.
<ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> <li>a joint committee of both houses</li> </ol>
Use the worksheet below to figure the amount spent on legislators and other governmental officials and employees for each "event." Enter this amount on the Lobbyist Activity Report.
List each group event separately. Make additional copies of this page if necessary. Record total expenditures for each group event in Section B. You must then calculate and post on the Lobbyist Activity Report only the amount actually spent on public officials. If you share expenses with another reporting lobbyist, report only your portion of the expenses and list the names of other cosponsors in Section C below.
Section A: Event Information
Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" category on the Lobbyist Activity Report Form. List the names of attendees on this form or attach additional information pages. If using this form, list the names in item 5 below, as well as other event information requested in items 1 through 4 and complete the Section B calculations.
1. Date of event: 2/1/2018 Location: WY Culture Center
2. Type of event (reception, dinner, etc.): Hospital Day Breaklast
3. Event sponsor: WV Hospital Association (If you shared the sponsorship and expenses with others, you must also complete Section C below.)
4. Which of the following governmental groups were invited? All members of:  a. the Legislature  b. either house of the Legislature  d. a joint committee of both houses
OR  5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:
Section B: Calculate Reportable Expenses  Some calculations must be performed manually.
1. 3.888.90 ÷ 150 = \$ 25.93 (total cost of event) ÷ (total attendance) (per capita cost)  2. Number of governmental officials or employees in attendance:  22 x 25.93 = F.70 POX 1
If this was a true Group Entertainment event and you were the sponsor, report the amount above as Group Entertainment on the Lobbyist Activity Report in Section 5G. If you shared expenses with others, complete section C below, and report only your portion of the cost. Note: If you classified the expenditure described in section A as "OTHER," it is reported on the Lobbyist Activity Report Form as a Meals & Beverages expense (5A), not as a "Group Expenditure" (5G).
Section C: Shared Sponsorship Expenses
Were any other lobbyists co-sponsors of this event? (yes or no)
2. If yes, with how many others are sharing the cost? List the names of all sponsors below:
3. What is your share of Box 1 above? \$  Record that amount in Box 2 and on the Lobbyist Activity Report in Section 5G.

Name: Joe Letnaunchyn

Date: 5/10/2018