West Virginia Ethics Commission

Lobbyist Activity Report Form Received 2018-01

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 304-558-0664 No faxed copies For office use only: Postmark ____ Days late __ Fine _

1. Name and contact information									
Name Danny Scalise					Phone (304) 925-0342				
- Name	Address 2018 Kanawha Boulevard, East					Email scalise@wvsma.org			
Addre	SS					Email _			
City, S	tate Zip Cha	rleston, WV 25	311						
2. R	2. Reporting period for which this activity report is being filed								
Check	7	eriod	Due Date		Application of the second of t				
х	2018-1 1	/1/18-4/30/18	5/15/2018						
3. Li	ist all employe	rs/organizations	that you rep	esent as a lobb	yist	Use	e additional rej	porting forms i	f necessary.
	West Virgini	a State Medica	I Association	7	4				
		College of Card							
2.	Amondan	Jonoge or our	alology		5				
3.					6				
4. Lo	bbying activit	y summary - If th	here was no a	ctivity or expen	ditures, indicate	e "none."			
Mea	ls w/legislat	tors and com	mittee sta	ff. Campaig	n contribution	ons.			
					address records have	pro mosphili se			
	kpenditures	aliadas samais		ac mark born					
		ncluding compaig n any public offic				liate family, list t	the amounts so	ent in each of t	he following
catego	ries per each e	mployer you rep	resent. Comp	olete and attach	Schedule A to ti	nis report.			
	diture Categori		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.	Meals and Be		\$159.76	\$	\$	\$	\$	\$	\$159.76
В.	Lodging		\$	\$	\$	\$	\$	\$	\$
C.	Advertising		\$	\$	\$	\$	\$	\$	\$
D.	Travel		\$	\$	\$	\$	\$	\$	\$
E.	Gifts		\$	\$	Ś	\$	\$	\$	\$
	Oth F			\$	\$	\$	\$	\$	
F.	Other Expens		\$	\$ - Tunner		A	1 4		
G.	Group Expen	ditures	\$557	\$	\$	\$	\$	\$	\$557
G. H.	Group Expended Campaign Co	ditures ntributions	\$557 LIST AMOUN	\$ T IN "TOTAL EX	\$ PENDED" COLU	MN.			\$557 \$750
G. H.	Group Expended Campaign Co	ntributions expenditures	\$557 LIST AMOUN \$ 716 76	\$ T IN "TOTAL EX	\$ PENDED" COLUM	MN	\$	\$	\$557 \$750 \$1466.76
G. H. I. If you	Group Expended Campaign Co TOTAL of all esponsored or co	ditures ntributions expenditures ontributed to any	\$557 LIST AMOUN \$ 716 76	\$ T IN "TOTAL EX	\$ PENDED" COLUM	MN	\$	\$	\$557 \$750 \$1466.76
G. H. I. If you	Group Expended Campaign Co	ditures ntributions expenditures ontributed to any	\$557 LIST AMOUN \$ 716 76	\$ T IN "TOTAL EX	\$ PENDED" COLUM	MN	\$	\$	\$557 \$750 \$1466.76
G. H. I. If you s	Group Expended Campaign Control Con	ditures ntributions expenditures ontributed to any	\$557 LIST AMOUN \$ 716 76 y group event	\$ TIN "TOTAL EX \$ or shared expe	\$ PENDED" COLUM	MN	\$	\$	\$557 \$750 \$1466.76
G. H. I. If you sattach	Group Expen- Campaign Co TOTAL of all of sponsored or co a Schedule B for bbbyist certific	ditures ntributions expenditures ontributed to any or each event. ation – Please re	\$557 LIST AMOUN \$ 716 76 y group event	\$ TIN "TOTAL EX \$ or shared expe	\$ PENDED" COLUMN \$ nses, list the total	MN. \$	\$ ategory 5G imm	\$ \$ nediately above	\$557 \$750 \$1466.76 c. Complete and
G. H. I. If you sattach 6. Lo	Group Expen- Campaign Co TOTAL of all of sponsored or co a Schedule B for obbyist certification	ditures ntributions expenditures ontributed to any or each event. ation – Please re	\$557 LIST AMOUN \$ 716 76 y group event and and sign b	\$ TIN "TOTAL EX \$ or shared expe	\$ PENDED" COLUMN \$ nses, list the total	MN. \$ al expended in control of the	\$ ategory 5G imm	\$ sediately above	\$557 \$750 \$1466.76 e. Complete and
G. H. I. If you sattach 6. Lo To the a viola	Group Expen- Campaign Co TOTAL of all of sponsored or co a Schedule B for behavist certification of WV Coc	ditures ntributions expenditures ontributed to any or each event. ation – Please re owledge, the info de §68-3-9 to will	\$557 LIST AMOUN \$ 716 76 y group event and and sign b armation conti	\$ TIN "TOTAL EX \$ or shared expe	\$ PENDED" COLUMN \$ nses, list the total	MN. \$ al expended in control of the	\$ ategory 5G imm	\$ sediately above	\$557 \$750 \$1466.76 c. Complete and
G. H. I. If you sattach 6. Lo To the a viola may be	Group Expen- Campaign Co TOTAL of all of sponsored or co a Schedule B for behavist certification of WV Coc	ditures ntributions expenditures ontributed to any or each event. ation – Please re	\$557 LIST AMOUN \$ 716 76 y group event and and sign b armation conti	\$ TIN "TOTAL EX \$ or shared expe	\$ PENDED" COLUMN \$ nses, list the total	MN. \$ al expended in control of the	\$ ategory 5G imm	\$ sediately above	\$557 \$750 \$1466.76 c. Complete and

		Name: U	anny Scal	se			Date:	May 14, 20
Schedule A: WV Lob (Attach this completed sheet	-							
Complete this form if you have during this reporting period. Gifts, (5) Other Expenditures	If you have ma	de expenditures	in these cate	gories - (1) /	Meals & Bev			
If you shared any of these exp name. You are not required t contributions] and Group Ent Schedule B.	o report on Scl	nedule A detaile	d expenditure	es on Adverti	sing, Contri	butions [incl	uding p	oolitical
1. Expenditure Details - Report all expenditures in any those reported in Section 1a or reported on Schedule B. Tran lobbyist, identify who shared	of the categor or 2 (below) or sfer the totals	ries listed below any portion of a to section 5 on t	on a particula "Group Ente the Lobbyist A	ar person or ertainment" (Activity Repo	member of OR "Shared	Expense" ev	ent wh	ich are to be
Recipient name(s) and date of	Recipient name(s) and date of expenditure		Lodging	Travel	Gifts	Other	Tot	
Senator Ron Stollings Janua	ary 5 2018	beverages 108.57	.1	**************************************			ехр	108.57
Senator Mitch Carmichael Ma	THE SECTION OF SECTION ASSESSMENT	51.19						51.19
TOTAL Expenditu	res							159.76
1a Gifts (Group)								
Ordinarily gifts to individual le of the House or Senate, the er group it was given and the tot Transfer the total cost to the I Describe the gift(s)	ntire Legislatur al cost. You ne obbyist Activit	e or to standing eed not list each	or joint comm legislator wh n 5E .	nittees must o received th	be listed he	ere. Describe the name of	the ite	em, to which
2. Participation in a Pan Report expenditures on a part	icular person i	n the categories	listed below					ual's
participation in a panel or spe Recipient name and event	aking engagem Meals & beverages	Lodging	e totals to sec Travel	ction 5 on th	Scheduled enterta & other			Total \$ expended
	\$1.765 as a second and a second as a secon	arrapinav. L sauce		as una • o matemate				
3. Subjects of Lobbying				الدام المراكب	المسالم المسالم	altituli i = 1 = = = =		
For each recipient identified in then the subject matter of the Senator Stollings - Healthcare Sena	lobbying. Exa	mple: "Del. Joe l						

Name: Danny Scalise	Date: May 14, 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. for a dinner party, reception or other similar function if you invited ALL members of any of these four specific names of attendees do not need to be listed for these four specific groups.	Report expenditures groups. Individual
 the Legislature a standing or select committee of either house either house of the Legislature a joint committee of both houses 	
Use the worksheet below to figure the amount spent on legislators and other governmental officials and emp "event." Enter this amount on the Lobbyist Activity Report.	loyees for each
List each group event separately. Make additional copies of this page <i>if</i> necessary . Record total expenditures in Section B . You must then calculate and post on the Lobbyist Activity Report only the amount actually spenyou share expenses with another reporting lobbyist, report only your portion of the expenses and list the name sponsors in Section C below.	t on public officials. If
Section A: Event Information	
Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" cate Activity Report Form. List the names of attendees on this form or attach additional information pages. If using names in item 5 below, as well as other event information requested in items 1 through 4 and complete the Science of th	this form, list the
1. Date of event: March 10, 2018 Location: State Capitol Complex	
2. Type of event (reception, dinner, etc.): Lunch delivered to Senate and House Health Committee and staff	
3. Event sponsor: WVSMA (If you shared the sponsorship and expense must also complete Section C below.)	es with others, you
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	2
OR	
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the nan employees or public officials in attendance here or on an attachment to this form. List attendees	
Section B: Calculate Reportable Expenses Some calculations must be p	erformed manually.
1. $\frac{557}{\text{(total cost of event)}} \div \frac{36}{\text{(total attendance)}} = \frac{\$15.47}{\text{(per capita cost)}}$	
2. Number of governmental officials or employees in attendance: 36	
(governmental attendees) x (per capita cost)	
If this was a true Group Entertainment event and you were the sponsor, report the amount above as Group Er Lobbyist Activity Report in Section 5G. If you shared expenses with others, complete section C below, and rep of the cost. Note: If you classified the expenditure described in section A as "OTHER," it is reported on the Lo Form as a Meals & Beverages expense (5A), not as a "Group Expenditure" (5G).	ort only your portion
Section C: Shared Sponsorship Expenses	

1. Were any other lobbyists co-sponsors of this event? _____ (yes or no)

Record that amount in Box 2 and on the Lobbyist Activity Report in Section 5G.

3. What is your share of Box 1 above? \$_____

2. If yes, with how many others are sharing the cost?_____ List the names of all sponsors below:

BOX 2