Received

APR 18 2019

West Virginia Ethics Commission

Lobbyist Activity Report Form

2018-01

V✓ Ethics Commission

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664 No

No faxed copies

For office use only: Postmark

Late reporting fine - \$10 per business day past the due date (\$250 maximum)							Fine		
1. N	ame and contact information			· · · · · · · · · · · · · · · · · · ·					
Name	Name Robert M. Sellards Address 949 3rd Ave. Suite 200 Phone (304) 634-7326 Email rob. Sellard 5@ nelson mullins.								
City, S	tate Zip Huntington	NW A	25701		-				
2. R	eporting period for which this	activity report	is being filed						
Check	Report Period	Due Date				T	A. C.		
Х	2018-1 1/1/18-4/30/18	5/15/2018							
				and the second	ş				
3. Li	3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.								
SI Manager I Carl									
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3.				6					
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4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
none									
	kpenditures		No.						
	xpenditures, including campai							*	
	spent money on any public off					ne amounts sp	ent in each of t	he following	
	ries per each employer you re								
	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
Α.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel .	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts Other Eveneses	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses Group Expenditures	\$	\$	\$	\$	\$	\$	\$	
Н.	Campaign Contributions	<u> </u>	J	→ PENDED" COLUN	<u> </u>	۶	3		
1.	TOTAL of all expenditures	Ś	S	\$	///v.	Ś	Ġ	\$2,000.60	
	sponsored or contributed to a		1	l '	l evpended in ca		andiately above		
	a Schedule B for each event.	ity group event	or shared exper	ises, list tile tota	ii experided iii ca	itegory 30 iiiiii	lediately above	e. Complete and	
6. L	11 1	ead and sign b	elow.						
	obbyist certification – Please r	eau and orgin a							
To the			ained heroon an	d on any attache	nd materials is to	un correct and	l complete Lu	nderstand that it is	
	best of my knowledge, the inf	ormation cont					•	4	
a viola	best of my knowledge, the infition of WV Code §6B-3-9 to w	ormation conti illfully and kno					•	4	
a viola may b	best of my knowledge, the inf	ormation conti illfully and kno					•	4	