West Virginia Ethics Commission

Lobbyist Activity Report Form AUG 20 2018

2018-02

NY Ethics Commission

Received

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

304-558-0664
For office use only:
Postmark

Days late

No faxed copies

Rec'd_

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

Name and contact information						2011	<u 1<="" td=""><td>9/09</td></u>	9/09	
Name Michele Crist					Phone 304-541-2969				
Name Till A Com								A.Com	
Address P.O. Box 2499 Email MC151 D WDD7.									
		1 3 1	5 4						
City, State Zip So. Chas. WV 28303									
Lity, State cip									
2. Reporting period for which this activity report is being filed On the Parent Region Due Date									
Check	Report Period	9/17/2018			12 11 11				
X	2018-2 5/1/18-8/31/18	3/11/2010							
	Use additional reporting forms if necessary.								
3 List all employers/organizations that you represent as a lobbyts									
1112 Broadrasters ASSN 4									
1									
2.									
3									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
4. Lobbying activity summary - It there was no deality of supersonal formal summary - It there was no deality of supersonal formal superso									
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r Fune and its upper									
5. Expenditures If no expenditures, including campaign contributions, mark here:									
and the official amployee or member of his or ner infinediate failing, has the unionite specific									
the new earth ampleyer you represent. Complete and attach schedule A to this report.									
Expenditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
	Lodging	\$	\$	\$	\$	\$	\$	\$	
B.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D,	Travel	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures	Ś	\$	\$	\$	\$	\$	\$	
Н.	Campaign Contributions	LIST AMOUI	VT IN "TOTAL E	XPENDED" COLU	IMN.			\$	
			A	ė	¢	\$	\$	\$ Complete and	
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									
To the best of my knowledge, the information contained hereon and on any attached materials is the personal that if convicted of such an act, I 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									
Date: 5-80-16									
Lobbyist Signature:									