West Virginia Ethics Commission

Lobbyist Activity Report Form

2018-02

I/Z Received

SEP 17 2018

NV Ethics Commission

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

Charleston, WV 25301								
304-558-0664	No faxed copies							
For office use only:								
Postmark	Rec'd							
Days late	Fine							

1. Name and contact information														
Name / his Mar								Phone						
Address								maiļ		M	WE			
		1 11	4					\\					7	
City, State Zip														
2 Re	2. Reporting period for which this activity report is being filed													
Check	Report	Period	Due (The second second								-	
Х	2018-2	5/1/18-8/31/18		/2018										
arrage 178	(新港泰夫)	5/1/10 0/01/10 1/1/20 1/33 1/33 (etc.)			E well to be to a	Section Compay	WHEN SHOP	31,00	-	ende,t.	it.	-4 1 To 1 T	-	
	3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.													
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3.	HZC	Strategies				6	AIS	ervic	es Ca	mpa-	y			
1. Alliane, for Pespensible Consum legal forming 2. Alhatic Trainers Association, WV 5. Insurana Auto Arctions 3. HZC Strategies 6. RAI Services Company														
4. Lo	bbying acti	ivity summary - If t	here wa	s no ac	tivity or exper	nditures, indicat	e "none."							
17														
Le	5/5/9/7	in/Execut	1 re										_2	
_ ′		1												
-													_	
5. Ex	penditures												-	
		, including campai	an contr	ibution	s mark here:									
		y on any public off					diate fami	ly list t	he amoi	inte en	ent in each of t	he following	-	
		h employer you re							ne annot	anto opi	ent in each or i	tic ionowing		
	liture Categ		Employ		Employer 2	Employer 3	Employ		Emplo	ver 5	Employer 6	yer 6 Total Expended		
A.		l Beverages		2	A 10.00	A	\$ &			0	\$ &	\$ 🖎	-	
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C.	Advertisin	<u> </u>	\$		\$	\$	\$		\$	1	\$	Ċ	_	
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E,	Gifts		\$,	\$	c c	¢		¢ ,	1	\$	\$ 8		
F.	Other Exp			/	1	3 1/	÷ \	V	2	V	2		_	
G.	Group Exp		\$ \$	40111) V	(DENIDED# SOLL	> V	<u></u>	1 2	<u> </u>	3	\$ 6	-	
Н.		Contributions				(PENDED" COLU			6.5		6 10	\$ 650,00		
1.		all expenditures	\$ 32		\$ 82	\$ 2	\$ 0		\$ 8	EC inner	\$ 8	5 65000		
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.														
T- 46	L	lua a colla alace Alece C			nod ba	ad on on:	and make -	ala ia +=		oct and	complete I	docatand that it	ic	
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 jail of both.														
may be filled, selftenced to fall doubth.														
Lobbyist Signature: Date: 7/19/18														
													1	

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Days late __

Postmark Rec'd Fine ____

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1. N	ame and co	tact information											
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Address							Phone_	Phone					
Addres	is							Email		101			
		SAI	116										
City, St	ate Zip	On r.											
2. Re	porting per	iod for which this	activit	v repor	t is bei	ng filed							
Check	Report	Period		e Date	450								
X	2018-2	5/1/18-8/31/18	9/1	7/2018									
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3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.													
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	111.10	in Internal	fred	10	4	\							
2.	NV JOU	CTY OF MICH	16073		m w	V)	5						
3.	36												
4. Lo	bbying activ	ity summary - If t	here w	vas no a	ctivity	or exper	nditures, indicat	e "none."					
1	A 1955 -	0.40				,							
leg	15/9774	- / Execut	Ive										
		.31											
					-								
5. Ex	penditures												
If no ex	penditures,	including campai	gn con	tributio	ns, ma	ırk here:							
If you s	pent money	on any public offi	icial, er	nployee	or me	mber of	his or her imme	diate family, list t	the amounts sp	ent in each of t	he fol	lowing	
catego	ries per each	employer you rep	presen	t. Comp	lete a	nd attach	Schedule A to t	his report.					
Expend	diture Catego	ories	Employer 1		Employer 2		Employer 3	Employer 4	Employer 5	5 Employer 6 T		Total Expended	
A.	Meals and	Beverages	\$	SZ.	\$	2	\$	\$	\$	\$	\$	8	
B.	Lodging		\$	1	\$		\$	\$	\$	\$	\$	1	
C.	Advertising		\$		\$		\$	\$	\$	\$	\$		
D.	Travel		\$	3	\$		\$	\$	\$	\$	\$		
E.	Gifts		\$		\$		\$	\$	\$	\$	\$		
F.	Other Expe	nses	\$		\$	1	\$	\$	\$	\$	\$		
G.	Group Expe	enditures	\$ 1		\$	V	\$	\$	\$	\$	\$		
Н.		Contributions	LIST	AMOUN	T IN "	TOTAL EX	(PENDED" COLU	MN.			\$	Page 1-650	
1.		ll expenditures		2	\$	82	\$	\$	\$	\$	\$	650	
	•	contributed to an	ny grou	p event	or sha	red expe	enses, list the tot	al expended in c	ategory 5G imn	nediately above	. Con	nplete and	
attach	a Schedule B	for each event.											
6. Lo	hhvist certif	ication – Please re	ead an	d sign h	elow.								
		nowledge, the info											
		ode §6B-3-9 to wi		and kno	wingly	file a fals	se or incomplete	report. I furthe	r understand th	at if convicted	of suc	h an act, I	
may be fined, sentenced to jail or both.													
Lobbyi	st Signature:	1h	- M/	1-					Date:	2/14/18	7		
LODDY	or Signature	0	V	-						1			