## Received

West Virginia Ethics Commission

## **Lobbyist Activity Report Form**

2018-02

**VV Ethics Commission** 

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: Rec'd\_\_\_\_ Postmark \_\_\_\_

Late reporting fine - \$10 per business day past the due date (\$250 maximum)									
1. Na	ame and contact information				40.4				
Name Howard Mullens						Phone 304-342-5564			
Name Toward Walloris					Email hlmullens@suddenlink.net				
Address 2020 Kanawah Blvd., E.						Email			
City Ca	ate Zip Charleston, WV 253	11							
City, St	ate zip								
	eporting period for which this	a stivity report	le hoing filed		_as any other control of				
2. Re Check	Report Period	Due Date	is being mea	Ser Seall Service			14474		
х	2018-2 5/1/18-8/31/18	9/17/2018			1500				
					12.1				
3. Li:	et all employers/organizations	that you repr	esent as a lobb	vist	Use	additional rep	orting forms if	necessary.	
3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.  WAY Municipal League									
1. VVV Widinospar Ecagod, ,									
2. Bost drink association- Beverage ASSOCIATION 5.									
1. WV Municipal League, , 2. Soft drink association 3. WV Rural Water Association 4  WV Rural Water Association 6  1. We additional reporting forms if necessary.  4  6  1. WV Rural Water Association									
4. Lo	obbying activity summary - If t	here was no a	ctivity or expen	ditures, indicate	e "none."				
Lobbying activity summary - If there was no activity or expenditures, indicate "none."  Municipal Government, soft drinks, rural water sewer issues									
IVIUITICIPAL GOVERNMENT, SOIT UNITING, FUTAL WATER CONST. 188888									
	kpenditures			F / T					
If no e.	xpenditures, including campai	ign contributio	ns, mark here:	Li h i	diata family list t	ho amounts en	ant in each of t	he following	
If you	spent money on any public off ries per each employer you re	icial, employee	or member of	nis or ner immed Schedule A to t	his report.	ille amounts sp	ent in each of i	ine following	
-	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
1	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
A. B.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts	\$	\$	\$	\$	\$	\$	\$	
f.	Other Expenses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Contributions	LIST AMOUN	1	KPENDED" COLU	IMN.	TA THE RESERVE OF THE PARTY OF		\$	
1.	TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$ Complete and	
If you	sponsored or contributed to a	ny group event	or shared expe	enses, list the to	tal expended in c	ategory 5G imr	пеагатегу авох	e. Complete and	
attach	a Schedule B for each event.								
6. L	obbyist certification - Please	read and sign b	elow.						
							d aamaminko 1 u	ndocstand that it is	
To the	best of my knowledge, the in	formation cont	ained hereon a	nd on any attacl	red materials is t	rue, correct and	a complete. I u nat if convicted	of such an act. I	
a violation of WV Code §68-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if convicted of such an act, I									
	the death and a letter to the	ath	0,		z (cpara v tara)			,	
may b	the fined, sentenced to jail or bo	oth.	5 (I)		z (opora viara)		9-10-1		