## **West Virginia Ethics Commission**

## Received

## Lobbyist Activity Report Forgep 06 2018

2018-02

NV Ethics Commission

304-558-0664 No faxed copies

For office use only:

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

Days late \_\_\_\_\_\_ Fine \_\_\_\_\_\_

West Virginia Ethics Commission Attn: Lobbyist Registrar

210 Brooks St., Ste. 300 Charleston, WV 25301

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

1. Name and contact information									
Name Angela Vance						Phone (304) 340 -4603			
Address 300 Summers St, Suite 400						Email avance@aarp.org			
Additess									
				-					
City, State Zip Charleston, WV 25301									
2. Reporting period for which this activity report is being filed									
Check		eriod	Due Date			14 T			
Х	2018-2 5	/1/18-8/31/18	9/17/2018						
3. List all employers/organizations that you represent as a lobbyist									
1. AARP 4									
2 5									
36									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
Supporting Family Caregivers/Quality home and Community Based Services, Accessing Affordable Healthcare, Protecting Pensions,									
retirement income and combatting financial exploitation, protecting access to livable communities and affordable reliable energy									
and telecommunications.									
5. Expenditures									
If no expenditures, including compaign contributions, mark here:									
If you spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following									
catego	ries per each	employer you rep							T
Expen	Expenditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A.	Meals and Beverages		\$0	\$	\$	\$	\$	\$	\$0
B.	Lodging		\$0	\$	\$	\$	\$	\$	\$0
C.	Advertising		\$0	\$	\$	\$	\$	\$	\$0 \$0
D.	Travel		\$0	\$	\$	\$	\$	\$	\$0
E.	Other Evpenses		\$0	\$	\$	\$	\$	\$	\$0
F.	Other Expenses Group Expenditures		\$0 \$0	\$	\$	\$	\$	\$	\$0
G.	Campaign Contributions			T AMOUNT IN "TOTAL EXPENDED" COLU			7		\$0
H.			\$ 0	S	S	Ś	Ś	S	\$0
I. TOTAL of all expenditures \$ 0 \$ \$ \$ \$ \$ \$ \$ \$ \$ 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									
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 b	e fined, sente	nced to jail or bot	th	/			,	2/110	
Lobbyist Signature: Mycle Vance Date: 4/6/18									
Loodyist signature:									