West Virginia Ethics Commission

Lobbyist Activity Report Form

2018-03

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 No faxed copies

304-558-0664

Days late __

For office use only: Postmark _____ Rec'd___

Fine_

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

1. Name and contact information										
Name Matthew G. Ballard						Phono	Phone 304-340-4253			
Address 1116 Smith Street										
Address 1116 Smith Street Email mballard@charlestonwvchamber.com										
	$R_{e_{C_{\alpha}}}$									
City, State Zip Charleston, WV 25301								J	A. Solved	
Address 1116 Smith Street City, State Zip Charleston, WV 25301 2. Reporting period for which this activity report is being filed Check Report Period Due Date x 2018-3 9/1/18-12/31/18 1/15/2019										
2. Reporting period for which this activity report is being filed									2010	
Check		Period	Due Date			Com				
'Х	2018-3	9/1/18-12/31/18	1/15/2019			16:01			1185/00	
			-	197 E. III		11 10 13				
3. List all employers/organizations that you represent as a lobbyist										
1. Charleston Regional Chamber of Commerce										
2 5										
3 6										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
None										
5. Expenditures										
If no expenditures, including campaign 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										
categories per each employer you represent. Complete and attach Schedule A to this report.										
	nditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A. B.	Meals and Beverages		\$0.00	\$	\$	\$	\$	\$	\$0.00	
C.	Lodging Advertising		\$ 0.00	\$	\$	\$	\$	\$	\$ 0.00	
D.	Travel		\$0.00	\$	\$	\$	\$	\$	\$ 0.00	
E.	Gifts		\$0.00	\$	\$	\$	\$	\$	\$ 0.00	
F.	Other Expenses		\$ 0.00	\$	\$	\$	\$	\$	\$0.00	
G.	Group Expenditures		\$ 0.00	\$	\$	\$	\$	\$	\$0.00	
H.	Campaign Contributions		LIST AMOUNT IN "TOTAL EXPENDE		PENDED" COLUI	VIN.			\$ 100.00	
			\$ 0.00	\$	\$	\$	\$	\$	\$ 100.00	
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										
10 the	best of my k	nowledge, the infor	mation conta	ained hereon an	d on any attache	ed materials is tr	ue, correct and	complete. I ur	iderstand that it is	
may be	fined, sente	ode §6B-3-9 to will enced to jail or both	iuny and know	wingly tile a tals	e or incomplete	report. I further	understand th	at it convicted	or such an act, I	
		1/ 1/1/1/ 1/1	1	Pm()	X			1/7/19)	
Lobbyist Signature: Date:										