West Virginia Ethics Commission

C.

D.

E.

F.

G.

H.

Advertising

Other Expenses

Group Expenditures

Campaign Contributions

TOTAL of all expenditures

Travel

Gifts

Lobbyist Activity Report Form

\$

\$

\$

\$

\$0

\$

\$

\$

\$

\$

\$0

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

JAN 0 2 2019

WY Ethics Gemmission

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664 No faxed copies

304-558-0664
For office use only:
Postmark

Days late

only: _____ Rec'd____

\$0

\$0

\$0

\$0

\$ 0

\$0 250

\$ 250

Name and contact information Name Sharon L. Lansdale Phone 304/397-4071 Address Center for Rural Health Development, Inc. Email sharon.lansdale@wvruralhealth.org 75 Chase Drive City, State Zip Hurricane WV 25526 Reporting period for which this activity report is being filed Report Check Period **Due Date** 2018-3 9/1/18-12/31/18 1/15/2019 List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary. 1 Center for Rural Health Development Lobbying activity summary - If there was no activity or expenditures, indicate "none." Met with various legislators regarding community health **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. **Expenditure Categories** Employer 1 Employer 2 Employer 3 Employer 4 Employer 6 **Total Expended** Meals and Beverages \$0 A. \$ \$ \$ \$ \$ В. \$ Lodging \$ \$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.

\$

\$

\$

\$

\$

LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.

\$

\$

\$

\$

\$

\$

\$

Ś

\$

\$

\$

Ś

\$

\$

\$0

6.	Lobbyist certification – Please read and sign below.	
a vi	the best of my knowledge, the information contained hereon and on any attached materials is iolation of WV Code §6B-3-9/to willfully and knowingly file a false or incomplete report. I furth	true, correct and complete. I understand that it i er understand that if convicted of such an act, I
	by be fined, sentenced to fail or both. Substitution of the sentenced to fail or both. Substitution of the sentenced to fail or both.	Date: 1 2 2019