## **West Virginia Ethics Commission**

## **Lobbyist Activity Report Form**

Received NY Ethies Commission

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301

304-558-0664 For office use only:

Postmark \_\_\_\_\_

No faxed copies

Rec'd\_

2018-03

Late reporting fine - \$10 per business day past the due date (\$250 maximum)  Days late Fine										
1. Name and contact information										
	Angela Vance Phone 304-340-4603									
1444114									·	
Address 300 Summers St, Suite 300 Email avance@aarp.org										
City, State Zip Charleston, WV 25301										
2. Reporting period for which this activity report is being filed										
Check	Report	Period	Due Date							
х	2018-3	9/1/18-12/31/18	1/15/2019							
3. Li	List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.									
1,	1. AARP 4									
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3.	3									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
Long-Term Care- Services and Supports Financial Security Utilities/Broadband										
5. Expenditures  If no expenditures, including campaign contributions, mark here:   ✓										
If no e	xpenditure	s, including campaig ey on any public offic	in contributio	ns, mark nere:		lista family list t	he amounts sn	ent in each of t	he following	
If you	spent mone	ey on any public office	ciai, employee recent Comp	or member of r	Schedule A to the	nate ranny, nst t nis report.	ine amounts sp	ent in cach or i	THE TOHOWING	
categories per each employer you re Expenditure Categories			Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
B.	Lodging		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
C.	Advertising		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
D.	Travel		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
E.	Gifts		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
F.	Other Expenses		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
G.		penditures	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Н.		n Contributions	LIST AMOUN	T IN "TOTAL EX	PENDED" COLU	MN.	The same of the last		\$0	
1.	TOTAL of	f all expenditures	\$ 0	\$0	\$0	\$0	\$0	\$0	\$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.										
C. Labelité contification. Plance road and sign balour										
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, se	ntenced to jail or bot	th. 1 /	5000 W				1 / 1 1	a	
Lobbyist Signature: Malla Vand										
Foodbligt signature:										