

West Virginia Ethics Commission

attach a Schedule B for each event.

Lobbyist Activity Report Form

2019-03

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: Postmark

Late reporting fine - \$10 per business day past the due date (\$250 maximum)								ec'd
1. Name and contact information								
Name Joseph T. Johns Phone 304-720-2300								
Business Address 216 Brooks Street, Suite 200								
Business Address 216 Brooks Street, Suite 200 Business Email jjohns@turnerjohns.com								
City, State Zip Charleston WV 25301								
2. Reporting period for which this activity report is being filed								
Check		Due Date	A DESCRIPTION OF THE PARTY OF T	A SHAREST AND A	1000000			
Х	2019-3 9/1/19 - 12/31/1	Control of the Contro	THE PERSON NAMED IN					
2. List all amplement formations that we would be labeled.								
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.								f necessary.
1. American Express								
2 5								
5.								
3 6								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
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.								
Exper	nditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A.	Meals and Beverages	5	\$	\$	\$	\$	\$	5
В.	Lodging	S	\$	\$	\$	\$	\$	\$
C.	Advertising	\$	\$	\$	\$	\$	\$	\$
D.	Travel	\$	\$	\$	\$	\$	\$	\$
E.	Gifts	5	\$	\$	\$	\$	\$	\$
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H.	Campaign Contributions	LIST AMOUN	IT IN "TOTAL EX	RPENDED" COLU	MN.	A STATE OF THE STA		\$
1.	TOTAL of all expenditures	\$	\$	\$	\$	\$	S	Ś

If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and