

West Virginia Ethics Commission

## **Lobbyist Activity Report Form**

2019-03

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

West Virginia Ethics Commission
Attn: Lobbyist Registrar
21.0 Brooks St., 3te. 300
Charleston, WV 25301
304-558-0664 No faced copies
For office use only:
Postmark Rec'd
Days late Rec'd

	iame and co	AND THE RESIDENCE OF THE PARTY							
lame	Joe Letn	aunchyn				Phone (	(304) 344-97	44	
lusin	ess Address	100 Associa	tion Drive		Bi	usiness Email Jo			
Ma. 6	CI	harleston, WV 2	25311						
лгу, з	cate Zip								
. R	eporting pe	riod for which this	activity repor	t is being filed					
heck	Report		Due Date	PER SERVICE	The state of the s	1875			
×	2019-3	9/1/19 - 12/31/19	1/15/202	0					
. L	lst all emplo	yers/organizations	that you repl	resent as a lobb	vist	Us	e additional rep	orting forms i	f necessary.
		Irginia Hospit	the same of the sa					The second	handa and a second
1		ga r ioopii			4				
2					5				
					_				
3					66				
3					6				
3					6				
		ivity summary - If t							
l. L	obbying act	ivity summary - If t							
l. L	obbying act								
	obbying act	ivity summary - If t							
	obbying act	ivity summary - If t							
	obbying act	ivity summary - If t							
· L	obbying act	ivity summary - If t Healthcare*							
. ц "Но	obbying act spitals &	ivity summary - If to Healthcare*	here was no a	ctivity or exper	nditures, Indicat				
HO	obbying act spitals &	ivity summary - If to Healthcare*	here was no a	ctivity or exper	nditures, indicat	a "none."			the following
HO.	spitals &	ivity summary - If to Healthcare*  Healthcare*  If the Healthcare is the Healthcare	here was no a gn contributio cial, employee	ctivity or exper	nditures, indicat	e "none."			the following
HO:	spitals &	ivity summary - If to the Healthcare  Healthcare  If the Healthcare  I	here was no a gn contributio cial, employee	ctivity or exper	nditures, indicat	e "none."			the following
Ho.	spitals &	ivity summary - If to the Healthcare  Healthcare  If the Healthcare  I	there was no a gn contributio clai, employee present. Comp	etivity or exper	his or her immens Schedule A to the Employer 3	diate family, list this report.	the amounts sp	ent in each of t	
HO:	spitals &	ivity summary - If to Healthcare*  Healthcare*  I H	gn contribution clai, employee present. Comp Employer 1 \$138.81	ens, mark here: or member of olete and attach Employer 2	his or her immen Schedule A to the Employer 3	diate family, list this report.  Employer 4	the amounts sp	ent in each of t	Total Expend
Fno a you at ego	expenditures spent mone ories per each diture Catal	ivity summary - If to Healthcare <sup>17</sup> I Healthcare <sup>17</sup> I Healthcare <sup>17</sup> I Healthcare <sup>18</sup> I Healthca	gn contribution clai, employee present. Comp Employer 1 \$138.81	etivity or experience, mark here: or member of olete and attach	his or her immen Schedule A to t Employer 3 \$	diate family, list this report.  Employer 4  \$	the amounts sp	ent in each of t	Total Expend \$138.81 \$
HO.	expenditures spent mone ories per each iditure Cate Lodging	ivity summary - If to Healthcare <sup>17</sup> I Healthcare <sup>17</sup> I Healthcare <sup>17</sup> I Healthcare <sup>18</sup> I Healthca	gn contribution clai, employee present. Comp Employer 1 \$138.81 \$	ens, mark here: or member of elete and attach Employer 2 \$ \$ \$	his or her immen Schedule A to t	diate family, list this report.  Employer 4  \$ \$ \$	the amounts sp	ent in each of t	Total Expend \$138.81 \$
HO:	expenditures expenditures expenditures expenditures expenditure expenditures expendit	ivity summary - If to Healthcare <sup>17</sup> I Healthcare <sup>17</sup> I Healthcare <sup>17</sup> I Healthcare <sup>18</sup> I Healthca	gn contribution clai, employee present. Comp Employer 1 \$138.81 \$ \$	ens, mark here: or member of elete and attach Employer 2 \$ \$ \$ \$	his or her immen Schedule A to the Employer 3 \$ \$ \$ \$ \$	diate family, list this report.  Employer 4  \$ \$ \$ \$	the amounts sp	ent in each of the Employer 6 \$ \$ \$ \$ \$ \$ \$ \$	**Total Expand \$138.81 \$ \$ \$
HO:	expenditures expenditures expenditures expenditure spent mone ories per eac iditure Categ Meals and Lodging Advertisin Travel	ivity summary - If to Healthcare*  Healthcare*  If the Healthcare*	gn contribution clai, employee present. Comp Employer 1 \$138.81 \$	ens, mark here: or member of elete and attach Employer 2 \$ \$ \$	his or her immen Schedule A to t	diate family, list this report.  Employer 4  \$ \$ \$	the amounts sp	ent in each of the Employer 6 \$ \$ \$ \$ \$	Total Expend \$138.81 \$
HO.  HO.  HO.  HO.  J. L.  Ho.  Ho.  Ho.  Ho.  Ho.  Ho.  Ho.  H	expenditures expenditures expenditures expenditures expenditures expenditure spent mone ories per eac diture Cate Meals and Lodging Advertisin Travel Gifts Other Exp	ivity summary - If to Healthcare*  Healthcare*  If the Healthcare*	gn contribution clai, employee present. Comp Employer 1 \$138.81 \$ \$ \$	ms, mark here: or member of plete and attach Employer 2 \$ \$ \$ \$	his or her immens Schedule A to to Employer 3 \$ \$ \$ \$ \$ \$ \$ \$	diate family, list his report.  Employer 4  \$ \$ \$ \$ \$	the amounts sp  Employer 5 \$ \$ \$ \$ \$	ent in each of the Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expend \$138.81 \$ \$ \$
HO.  HO.  HO.  Ho.  J.  J.  J.  J.  J.  J.  J.  J.  J.	expenditures expenditures expenditures expenditures spent mone ories per eac diture Cate Meals and Lodging Advertisin Travel Gifts Other Exp Group Exp	ivity summary - If to Healthcare*  Healthcare*  If the Healthcare*	gn contribution cial, employee present. Complemployer 1 \$138.81 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ns, mark here: or member of blete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$	his or her immens Schedule A to to Employer 3 \$ \$ \$ \$ \$ \$ \$ \$	diate family, list this report.  Employer 4  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	the amounts sp  Employer 5 \$ \$ \$ \$ \$ \$	ent in each of the Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expend \$138.81 \$ \$ \$ \$

Schedule A: WV Lob (Attach this completed sheet								
Complete this form if you hav during this reporting period. I Gifts, (5) Other Expenditures -	If you have made	e expenditure	s in these categ	ories - (1) A	Aeals & Bev			
if you shared any of these exp name. You are not required to contributions] and Group Ente Schedule B.	o report on Sche	dule A detaile	ed expenditures	on Adverti	sing, Contrib	outions [inc	uding p	olitical
1. Expenditure Details - Report all expenditures in any those reported in Section 1a or reported on Schedule B. Tran lobbyist, identify who shared	of the categorie or 2 (below) or a sfer the totals to the cost in the a	es listed below my portion of section 5 on	on a particular a "Group Enter the Lobbyist Ac	person or tainment" ( tivity Repo	member of OR "Shared	Expense" ev	vent whi ditures v	ch are to be vith another
Recipient name(s) and date of	expenditure	Meals & beverages	Lodging	Travel	Gifts	Other	Tota	l \$ ended
Ted Cheatham 11/15/	2019	17.11					Jun 1	17.11
TOTAL Expenditu	res	17.11						17.11
1a Gifts (Group)								
Ordinarily gifts to individual le of the House or Senate, the er group it was given and the tot Transfer the total cost to the Describe the gift(s)	ntire Legislature tal cost. You nee Lobbyist Activity	or to standing d not list each Report, section	g or joint comm n legislator who	ittees must received th	be listed he ne gift, only	ere. Describ the name o	e the ite f the gro	m, to which
2. Participation in a Pan	el or Speakin	g Engageme	ent					
Report expenditures on a par participation in a panel or spe								al's
Recipient name and event	Meals & beverages	Lodging	Travel	Gifts		uled entertal		Total \$ expended
3. Subjects of Lobbying	,		1					
For each recipient identified in the subject matter of the Ted Cheatham - Hospitals & Hea	e lobbying. Exar	e, explain brie nple: "Del. Joe	efly the subjects I Jones – Health	of lobbying Care" or "I	z. List the in House Finan	dividual or ce Committ	group re ee - Env	cipient and ironment."
								8/16/201/

Name: Joe Letnaunchyn

Date: 1/14/2020

Name: Joe Le	tnaunchyn	Date: 1/14/2020
Schedule B: Group Entertainment & Shared Ex (Attach to the Lobbyist Activity Report)	penses	
<b>Instructions:</b> Group Entertainment functions include only the function a dinner party, reception or other similar function if you invited names of attendees do not need to be listed for these four specific	ALL members of any of these for	
<ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> </ol>	<ol> <li>either house of the Legisl</li> <li>a joint committee of both</li> </ol>	
Use the worksheet below to figure the amount spent on legislators "event." Enter this amount on the Lobbyist Activity Report.	and other governmental official	s and employees for each
List each group event separately. Make additional copies of this pain Section B. You must then calculate and post on the Lobbyist Act you share expenses with another reporting lobbyist, report only you sponsors in Section C below.	livity Report only the amount act	ually spent on public officials. If
Section A: Event Information		
Lobbying expenses for entertainment of "OTHER" group events are Activity Report Form. List the names of attendees on this form or a names in item 5 below, as well as other event information requests	ttach additional information pag	es. If using this form, list the
1. Date of event: 10/11/2019 Location: G	rent Memorial Hospital	
2. Type of event (reception, dinner, etc.): Legislative Briefing Contine	ntal Breakfast	
Event sponsor: West Virginia Hospital Association     must also complete Section C below.)	(If you shared the sponsorship a	nd expenses with others, you
a. the Legislature c. a s	All members of: tanding or select committee of e oint committee of both houses	ither house
0	Ŕ,	
5. OTHER: If the event was not in one of the four specific employees or public officials in attendance here or on Delegate John Paul Hott		
Section B: Calculate Reportable Expenses	Some calculation	s must be performed manually.
1. $58.50$ + 7 = \$8.4 (total cost of event) ÷ (total attendance) = \$7.50 (per capital)	cost)	
2. Number of governmental officials or employees in attendance:  1	BOX 1	
(Bovernmental actionates) v (ber papire cost)		
If this was a true Group Entertainment event and you were the spot Lobbyist Activity Report in Section 5G. If you shared expenses with of the cost. Note: If you classified the expenditure described in se Form as a Meals & Beverages expense (5A), not as a "Group Expen	others, complete section C beloction A as "OTHER," It is reported	w, and report only your portion
Section C: Shared Sponsorship Expenses		
Were any other lobbylsts co-sponsors of this event?	(yes or no)	
2. If yes, with how many others are sharing the cost? Lis	t the names of all sponsors below	w:
3. What is your share of Box 1 above? \$	-	
Record that amount in Box 2 and on the Lobbyist Activity Report in	Section 5G.	BOX 2

Name: Joe Letnaunchyn	Date: 1/14/2020
Schedule B: Group Entertainment & Shared Expenses (Attach to the Lobbyist Activity Report)	
<b>Instructions:</b> Group Entertainment functions include only the functions that fall within the following groups for a dinner party, reception or other similar function if you invited ALL members of any of these four specinames of attendees do not need to be listed for these four specific groups.	s. Report expenditures fic groups. Individual
<ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> <li>a joint committee of both houses</li> </ol>	
Use the worksheet below to figure the amount spent on legislators and other governmental officials and en "event." Enter this amount on the Lobbyist Activity Report.	ployees for each
List each group event separately. Make additional copies of this page if necessary. Record total expenditure in Section B. You must then calculate and post on the Lobbyist Activity Report only the amount actually specified specified by your share expenses with another reporting lobbyist, report only your portion of the expenses and list the necessary.	ent on public officials. If
Section A: Event Information	
Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" ca Activity Report Form. List the names of attendees on this form or attach additional information pages. If usl names in item 5 below, as well as other event information requested in items 1 through 4 and complete the	ng this form, list the
1. Date of event: 10/21/2019 Location: Stonewall Resort	
2. Type of event (reception, dinner, etc.): Luncheon - Republican Legislative Caucus	
3. Event sponsor: West Virginia Hospital Association (If you shared the sponsorship and expermust also complete Section C below.)	nses with others, you
4. Which of the following governmental groups were invited?  a. the Legislature  b. either house of the Legislature  All members of:  c. a standing or select committee of either house of the Legislature  d. a joint committee of both houses	use
OR	
OTHER: If the event was not in one of the four specific groups listed above, you must list the nemployees or public officials in attendance here or on an attachment to this form. List attended	
Section B: Calculate Reportable Expenses Some calculations must be	performed manually.
1. \$2,594.55 + 70 = \$37.16	
(total cost of event) + (total attendance) (per capita cost)	
2. Number of governmental officials or employees in attendance:	
(governmental attendees) x (per capita cost) = 2,526×88	
If this was a true Group Entertainment event and you were the sponsor, report the amount above as Group Lobbyist Activity Report in Section 5G. If you shared expenses with others, complete section C below, and r of the cost. Note: If you classified the expenditure described in section A as "OTHER," it is reported on the Form as a Meals & Beverages expense (5A), not as a "Group Expenditure" (5G).	eport only your portion
Section C: Shared Sponsorship Expenses	
Were any other lobbyists co-sponsors of this event? (yes or no)	
2. If yes, with how many others are sharing the cost? List the names of all sponsors below:	
3. What is your share of Box 1 above? \$	
Record that amount In Box 2 and on the Lobbyist Activity Report In Section 5G.  BOX 2	!

Name: Joe Letnaunchyn	Date: 1/14/2020
Schedule B: Group Entertainment & Shared Expenses (Attach to the Lobbylst Activity Report)	
<b>Instructions:</b> Group Entertainment functions include only the functions that fall within the following groups. Refor a dinner party, reception or other similar function if you invited ALL members of any of these four specific gnames of attendees do not need to be listed for these four specific groups.	eport expenditures roups. Individual
<ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> <li>a joint committee of both houses</li> </ol>	
Use the worksheet below to figure the amount spent on legislators and other governmental officials and emplowers." Enter this amount on the Lobbyist Activity Report.	yees for each
List each group event separately. Make additional copies of this page if necessary. Record total expenditures fin Section B. You must then calculate and post on the Lobbyist Activity Report only the amount actually spent of you share expenses with another reporting lobbyist, report only your portion of the expenses and list the name sponsors in Section C below.	on public officials. If
Section A: Event Information	
Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" categoractivity Report Form. List the names of attendees on this form or attach additional information pages. If using the names in item 5 below, as well as other event information requested in items 1 through 4 and complete the Section 1.	his form, list the
1. Date of event: 11/15/2019 Location: Braxton County Memorial Hospital	
Type of event (reception, dinner, etc.): Legislative Briefing Continental Breakfast	
3. Event sponsor: West Virginia Hospital Association (If you shared the sponsorship and expenses must also complete Section C below.)	with others, you
4. Which of the following governmental groups were invited? All members of:  a. the LegIslature  b. elther house of the LegIslature  d. a joint committee of both houses	
OR	
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the name employees or public officials in attendance here or on an attachment to this form. List attendees he Delegate Brent Boggs and Senator Doug Facemire	
Section B: Calculate Reportable Expenses Some calculations must be per	formed manually.
1. $\frac{90.00}{\text{(total cost of event)}} \div \frac{30}{\text{(total attendance)}} = $3$ (per capita cost)	
2. Number of governmental officials or employees in attendance:	
(governmental attendees) x (per capita cost) = 6 BOX 1	
If this was a true Group Entertainment event and you were the sponsor, report the amount above as Group Ent Lobbylst Activity Report In Section 5G. If you shared expenses with others, complete section C below, and report of the cost. Note: If you classified the expenditure described in section A as "OTHER," it is reported on the Lobi Form as a Meals & Beverages expense (5A), not as a "Group Expenditure" (5G).	rt only your portion
Section C: Shared Sponsorship Expenses	
Were any other lobbyists co-sponsors of this event? (yes or no)	
2. If yes, with how many others are sharing the cost? List the names of all sponsors below:	
3. What is your share of Box 1 above? \$	
Record that amount In Box 2 and on the Lobbyist Activity Report in Section 5G.  BOX 2	

Schedule B: Group Entertainment & Shared Expenses (Attach to the Lobbyist Activity Report)
Instructions: Group Entertainment functions include only the functions that fall within the following groups. Report expenditures for a dinner party, reception or other similar function if you invited ALL members of any of these four specific groups. Individual names of attendees do not need to be listed for these four specific groups.
<ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> <li>a joint committee of both houses</li> </ol>
Use the worksheet below to figure the amount spent on legislators and other governmental officials and employees for each "event." Enter this amount on the Lobbylst Activity Report.
List each group event separately. Make additional copies of this page if necessary. Record total expenditures for each group event in Section B. You must then calculate and post on the Lobbyist Activity Report only the amount actually spent on public officials. If you share expenses with another reporting lobbyist, report only your portion of the expenses and list the names of other cosponsors in Section C below.
Section A: Event Information
Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" category on the Lobbyist Activity Report Form. List the names of attendees on this form or attach additional information pages. If using this form, list the names in item 5 below, as well as other event information requested in items 1 through 4 and complete the Section B calculations.
1. Date of event: 11/21/2019 Location: Summeraville Regional Medical Center
2. Type of event (reception, dinner, etc.): Legislative Briefing Breakfast
3. Event sponsor: West Virginia Hospital Association (If you shared the sponsorship and expenses with others, you must also complete Section C below.)
4. Which of the following governmental groups were invited? All members of:  a. the Legislature  b. either house of the Legislature  d. a Joint committee of both houses
OR
OR  5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenbarger
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 148.79
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenberger  Section B: Calculate Reportable Expenses  1. 148.79
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 148.79
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenberger  Section B: Calculate Reportable Expenses  1. 146.79
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenberger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 148.79
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 148.78
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenberger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. \[ \frac{148.78}{\text{(total cost of event)}} \] + \[ \frac{28}{\text{(total attendance)}} \] = \[ \frac{\xi_0.8}{\text{(per capita cost)}} \]  2. Number of governmental officials or employees in attendance:  \[ 2
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Jordan Hill, Senator John Pitsenberger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 148.79

Name: Joe Letnaunchyn

Date: 1/14/2020

Schedule B: Group Entertainment & Shared Expenses (Attach to the Lobbyist Activity Report)
Instructions: Group Entertainment functions include only the functions that fall within the following groups. Report expenditures for a dinner party, reception or other similar function if you invited ALL members of any of these four specific groups. Individual names of attendees do not need to be listed for these four specific groups.
<ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> <li>a joint committee of both houses</li> </ol>
Use the worksheet below to figure the amount spent on legislators and other governmental officials and employees for each "event." Enter this amount on the Lobbyist Activity Report.
List each group event separately. Make additional copies of this page if necessary. Record total expenditures for each group event in Section B. You must then calculate and post on the Lobbyist Activity Report only the amount actually spent on public officials. If you share expenses with another reporting lobbyist, report only your portion of the expenses and list the names of other cosponsors in Section C below.
Section A: Event Information
Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" category on the Lobbyist Activity Report Form. List the names of attendees on this form or attach additional information pages. If using this form, list the names in item 5 below, as well as other event information requested in items 1 through 4 and complete the Section B calculations.
1. Date of event: 12/10/2019 Location: St. Joseph's Hospital
2. Type of event (reception, dinner, etc.): Legislative Briefing Luncheon
3. Event sponsor: West Virginia Hospital Association (If you shared the sponsorship and expenses with others, you must also complete Section C below.)
4. Which of the following governmental groups were invited? All members of:  a. the Legislature c. a standing or select committee of either house  b. either house of the Legislature d. a joint committee of both houses
OR
OR  5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger
5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68  ÷ 26  = \$19.22
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanne, Senetor Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanne, Senator Bill Hamiliton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. \( \frac{499.68}{(\text{total cost of event})} + \text{(total attendance})} \) = \( \frac{519.22}{(\text{per capita cost})} \)  2. Number of governmental officials or employees in attendance:  \[ 5
OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:  Delegate Patrick Martin, Delegate Carl Martin, Delegate Caleb Hanna, Senator Bill Hamilton, Senator John Pitsenbarger  Section B: Calculate Reportable Expenses  Some calculations must be performed manually.  1. 499.68

Name: Joe Letnaunchyn

Date: 1/14/2020