West Virginia Ethics Commission

attach a Schedule B for each event.

Lobbyist Activity Report Form

2019-03

IAN 15 2020

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

304-558-0664 N For office use only:

Postmark

No faxed copies
___ Rec'd____

Late reporting fine - \$10 per business day past the due date (\$250 maximum) Days late Fine								
1. Name and contact information								
Name								
2. Reporting period for which this activity report is being filed								
Check	Report Period	Due Date						
X	2019-3 9/1/19 – 12/31/19	1/15/2020						
3. List all employers/organizations that you represent as a lobbyist								
1. WASTE MANAGEMENT 4. CSX RAILROAD								
2. CNX 5. FIRST ENERGY								
3. BANK OF AMERICA 6. DOMINION RESOURCES 7. OHIO VALLEY EMPLOYERS COUNCIL 8. ENERGY STORAGE VENTURE 9. DIVERSIFIED GAS 9 DIL								
LUMIN VALLET LAPLETER CHUNGE D. ENERGY STURADY YENTONE I, STUGGIFTED BAST OF								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
1) Discussion with ACC DESCRIPTION DAY AND THE LANGUAGE DESCRIPTION								
1) DISCUSSIONS WITH PSC REGARDING RAILRUAD TAXI HAULING CERTIFICATE ISSUES								
2) DISCUSSIONS WITH ADMINISTRATION RE: NATURAL GAS PRODUCTION ISSUES								
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.								
	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
Α.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$ 0
B.	Lodging	\$	\$	\$	\$	\$	\$	\$ 0
	Advertising Travel	\$	\$	\$	\$	\$	\$	\$ 0
E.	Gifts	\$	\$	\$	\$	\$	\$	\$ 0
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$ 0
G.	Group Expenditures	\$	Ś	\$	\$	\$	\$	\$ 0
Н.	Campaign Contributions			PENDED" COLUI				\$ 0
I.	TOTAL of all expenditures	\$ 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								