Received

MAY 1 5 2020

WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

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

2020-01

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664

For office use only:

No faxed copies

Postmark ____ Days late ____ Rec'd Fine

Name and contact information								
William T O-111 To 304-482-8240								
Name VIIIAM 1. Unvalas JI								
Name William T. Douglass Jr. Phone 304-483-8340 Business Address 146 Challes Fock Rd. Business Email WVU douglas & MSN. COM								
City, State Zip Spencer, WV 25276								
2. Reporting period for which this activity report is being filed								
Check	Report Period	Due Date						
x	2020-1 1/1/20 - 4/30/20	5/15/2020						
			SUSPECT.					
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.								
1. Reserve OH + Gas, Fix. 4.								
2. I Select MD 5.								
36								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
promoted telemedicine access hill								
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.								
4			Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
-	diture Categories	Employer 1	S S	\$	Ś	\$	\$	\$
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B.	Lodging	\$	\$	5	\$	\$	\$	\$
D.	Advertising Travel	\$	\$	\$	S	\$	\$	\$
E.	Gifts	\$	\$	\$	\$	\$	\$	\$
F.	Other Expenses	\$	\$	Ś	\$	Ś	\$	S
G.		Ś	\$	C	\$	4	\$	Ś
Н.	Group Expenditures Campaign Contributions	-	IT IN "TOTAL EX	(PENDED" COLU	MN -	1 7	-	Ś
1.	TOTAL of all expenditures	\$	S	S	S S	S	S	Š
			1		1	1	rediately above	Complete and
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.								