MAY 1 5 2020

WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

2020-01

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 Rec'd
Days late Fine

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

	lame and con								
Name	Alexander	r Macia				Phone	304-340-3835		
Business Address Spilman Thomas & Battle, PLLC					P	Business Email amacia@spilmanlaw.com			
7 (4 3 St H		awha Boulevard.				usiness Eman			
City, S	itate Zip Cha	arleston, West V	irginia 25301						
2. R	Reporting period	iod for which this	activity repor	t is being filed					~~~~
Check	Report P	Period	Due Date		ELS LABORED	10000			
Х	2020-1 1/	/1/20 - 4/30/20	5/15/2020	0					
								-	
				N. 10 - 2 X 14 - 2					
		ers/organizations		esent as a lobb	yist	Us	e additional rej	porting forms i	f necessary.
1	West Virgi	inia Energy Us	sers		4. Am	4. American College of Cardiology			
2. Delta Dental						5. West Virginia State Medical Association			
						6. West Virginia Consumer Finance Association			
	Maximus				10/0	ct Virginia Co	neumor Eine	non Acconic	tion
3	Maximus				6. We	st Virginia Co	nsumer Fina	nce Associa	ation
3	Maximus				6. We	st Virginia Co	nsumer Fina	nce Associa	ation
		rity summary - If t	here was no a	ctivity or exper			nsumer Fina	nce Associa	ation
i. L	obbying activi	rity summary - If t			nditures, indicat	e "none."		nce Associa	ation
1. L	obbying activi				nditures, indicat	e "none."		nce Associa	ation
1. L	obbying activi	rity summary - If t			nditures, indicat	e "none."		nce Associa	ation
i. L	obbying activi	rity summary - If t			nditures, indicat	e "none."		nce Associa	ation
Lob	obbying activi bying relate	rity summary - If t			nditures, indicat	e "none."		nce Associa	ation
Lob	obbying activi bying relate xpenditures	ity summary - If t ed to healthca	are, energy	and utilities	nditures, indicat	e "none."		nce Associa	ation
Lob	obbying activity bying related the second se	ity summary - If t ed to healthca including campal	are, energy gn contributio	and utilities	nditures, indicates, and consu	e "none." mer finance	issues.		
Lob	bying related bying related by the second se	ity summary - If the ded to healthca	gn contributio	and utilities ns, mark here: or member of	aditures, indicat s, and consu	e "none." mer finance	issues.		
. L Lob	bying related bying related by preditures by penditures, it is spent money of the period or its per each	ity summary - If to ed to healthca	gn contributio cial, employee present. Comp	ns, mark here: or member of lolete and attach	nditures, indicates, and consu	e "none." mer finance diate family, list his report.	issues.	ent in each of	the following
Lob	obbying activity bying related bying related by the separatures of the separature by	ity summary - If the ded to healthcare including campai on any public office employer you reportes	gn contributio cial, employee oresent. Comp Employer 1	ns, mark here: or member of lelete and attach	his or her imme Schedule A to t Employer 3	e "none." mer finance diate family, list his report. Employer 4	issues. the amounts sp	ent in each of l	the following Total Expend
Lob	xpenditures expenditures, is spent money ories per each diture Categor	ity summary - If the ded to healthcare including campai on any public office employer you reportes	gn contributio cial, employee present. Comp Employer 1	ns, mark here: or member of lolete and attach Employer 2	his or her imme Schedule A to t Employer 3	e "none." mer finance diate family, list his report. Employer 4	issues. the amounts sp Employer 5	ent in each of l Employer 6	the following Total Expend
LLob	obbying activity bying related bying related by the separatures of the separature by	including campal on any public officemployer you reportes Beverages	gn contributio cial, employee oresent. Comp Employer 1	ns, mark here: or member of lelete and attach	his or her imme Schedule A to t Employer 3	e "none." mer finance diate family, list his report. Employer 4	issues. the amounts sp	ent in each of l	the following Total Expend
i. E fno e fyou aatego expen	xpenditures expenditures, is spent money ories per each diture Categor Meals and B	including campal on any public officemployer you reportes Beverages	gn contributio cial, employee present. Comp Employer 1 \$	ns, mark here: or member of lolete and attach Employer 2	his or her imme Schedule A to t Employer 3	diate family, list his report. Employer 4 \$	the amounts sp	ent in each of t Employer 6	the following Total Expend
Efnoefyou atego	xpenditures expenditures, is spent money ories per each diture Categorial Meals and B Lodging Advertising	including campal on any public officemployer you reportes Beverages	gn contributio cial, employee present. Comp Employer 1 \$ \$	ns, mark here: or member of olete and attach Employer 2 \$ \$ \$	his or her imme Schedule A to t Employer 3 \$	diate family, list his report. Employer 4 \$ \$ \$	the amounts sp Employer 5 \$ \$ \$	ent in each of the Employer 6 \$ \$ \$ \$ \$	the following Total Expend \$ \$ \$
i. L Lob ii. E fno e f you natego expen iii. E iii. E iii. E iii. E iii. D iii. E iii. D iii. E iii.	xpenditures expenditures, is spent money ories per each diture Categorial Meals and B Lodging Advertising Travel	including campai on any public officemployer you reported	gn contributio cial, employee present. Comp Employer 1 \$ \$ \$ \$	ns, mark here: or member of olete and attach Employer 2 \$ \$ \$ \$	his or her imme Schedule A to t Employer 3 \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$	the amounts sp Employer 5 \$ \$ \$ \$	ent in each of s Employer 6 \$ \$ \$	the following Total Expend \$ \$ \$ \$
Lob	xpenditures, is spent money ories per each diture Categor Meals and B Lodging Advertising Travel Gifts	including campai on any public officemployer you reported	gn contributio cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	and utilities ns, mark here: or member of olete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$	his or her imme Schedule A to t Employer 3 \$ \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$ \$ \$ \$	the amounts sp Employer 5 \$ \$ \$ \$ \$	ent in each of s Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	the following Total Expend \$ \$ \$ \$ \$
S. Effoe effyou categoria. A. A	xpenditures expenditures, is spent money of ories per each diture Categorial Meals and B Lodging Advertising Travel Gifts Other Expenditure Expenditure	including campai on any public officemployer you reported	gn contributio cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	and utilities ns, mark here: or member of olete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$ \$	his or her imme Schedule A to t Employer 3 \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$ \$ \$ \$	the amounts sp Employer 5 \$ \$ \$ \$ \$ \$	ent in each of s Employer 6 \$ \$ \$ \$ \$ \$ \$	Total Expend \$ \$ \$ \$ \$ \$ \$