### JUN 1 0 2020

## West Wirginia 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 10 Fine 4
THE THEO

Late reporting fine - \$10 per business day past the due date (\$250 maximum)										
1.	Name and	contact information	on .							
Nam	Ange	R Moore				Phase	304 546 812	21		
1						Business Email angel@moorefirmofcharleston.com				
Business Address 106 Capitol Street Business Email angel@moorefirmofcharleston.com										
City,	State Zip _	Charleston W	V 25301							
2. Reporting period for which this activity report is being filled										
Chec	k Report	Period	Due Date	1774.37.70		M. W. 1877-				
×	2020-1	1/1/20 - 4/30/20	5/15/202	20	The second second	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -				
					ukity vingta dalah					
					American September 1	light of the last of the last		L		
3.	List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.									
		aineer Park				Med Express / Urgent Care				
1	4-									
	WV United Health Systems 5. United Care Services									
	Optum Inc. See Exhibit A for additional clients									
	**									
A Libbert and the common of th										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
municipal brinday, budget issue										
								-		
5. E	ependitures									
		including campa	ian contributio	ns mark here:						
		on any public of			his or her immer	diata family, list	the amounts on			
rateen	ries per earl	n employer you re	present. Comp	lete and attach	Schedule A to t	his report.	the amounts sp	ent in each of	the following	
	diture Catego		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	T-4-15	
A.	Meals and		5	\$	S	S	\$	S	Total Expended	
B.	Lodging	Devel ages	\$	\$	\$	\$	\$	-	\$	
C.	Advertising		\$	\$	S	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
	Gifts		\$	\$	\$	\$	\$	\$	\$	
	Other Expe	nses	\$	\$	S	\$	\$	\$	\$	
i.	Group Expe		\$	\$	S	S	\$	\$	\$	
1		Contributions	-	LIST AMOUNT IN "TOTAL EXPENDE		1 4	13	\$	\$	
-	NAME OF TAXABLE PARTY.	l expenditures	\$	\$	\$	S	Š		\$ /000	
VOLUE	nonsored or	contributed to a		or shared exper			Tiperon, FC !	15	e. Complete and	
ttach a	Schedule B	for each event.				- capended III C	aregory 3G IMM	registely abovi	e. Complete and	

#### **EXHIBIT A**

# ANGEL R. MOORE SUPPLEMENTAL LIST WV ETHICS COMMISSION LOBBYIST ACTIVITY REPORT FORM 2019-03

First Energy Corporation
Thompson Construction Group
DraftKings
FanDuel, Inc.
F.A.I.R., Inc.
Frontier Communications Corporation
Greenbrier Resort Hotel
Harvest Care Medical LLC
Google