## Received

## MAY 15 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 Fine

Late reporting fine - \$10 per business day past the due date (\$250 maximum)  Days late								je
1. Name and contact information								
Name	Name HOWARD MULICAS Phone 304-342-5564							
Business Address 2020 Kanawha Blvd & Business Email hlmulens @								
Syddenlink.nct								
City, State Zip Charleston WV 25311								
City, State Zip (110) 100 V 20011								
2. Reporting period for which this activity report is being filed								
Check		Due Date	100 St. Park 12 St		STATE OF THE PARTY			
х	2020-1 1/1/20 - 4/30/20	5/15/202	0					
-								
3. Li	3. List all employers/organizations that you represent as a lobbyist							
1. West Virginia Municipal League 4.								
1.West virginia Munium League 4.								
2. Beverage Association 5.								
3. WV Rural Water Association 6.								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."								
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.								
Expen	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
В.	Lodging	\$	\$	\$	\$	\$	\$	\$
C.	Advertising	\$	\$	\$	\$	\$	\$	\$
D.	Travel	\$	\$	\$	\$	\$	\$	\$
E.	Gifts	\$	\$	\$	\$	\$	\$	\$
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H.	Campaign Contributions		_	(PENDED" COLU		STATE OF THE STATE		\$
1.	TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$
	sponsored or contributed to a	ny group event	or shared expe	enses, list the tot	tal expended in c	ategory 5G imn	nediately abov	e. Complete and
attach a Schedule B for each event.								