Received

SEP 15 2020

WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

2020-02

West Virginia Ethics Commission
Attn: Lobbyist Registrar
210 Brooks St., Ste. 300
Charleston, WV 25301
204-538-0664 No faxed copies
For affice use only:
Postmart Rec'd
Days late Fine

| Name and contact information ame James R. Fealy Phone 304-342-1851 phone 304-342-1851 Business Address 300 Summers Street, Suite 980 Business Email feally@wvreale.com Reporting period for which this activity report is being filed to be k. Report Period Due Date Period Due Date Period Per | Postmari | Postmari Rec'd Days late Fine | | | | | | |
|--|-------------------|-------------------------------|--|--|--|--|--|--|
| ### Phone 304-342-1891 ### James R. Feally ### Phone 304-342-1891 ### Business Email | | | | | | | | |
| Business Address 300 Summers Street, Suite 980 Business Email | | | | | | | | |
| Business Address 300 Summers Street, Suite 980 Business Email | ne 304-342-1891 | 1 | | | | | | |
| Reporting period for which this activity report is being filed Neek Report Period Due Date | | | | | | | | |
| Reporting period for which this activity report is being filed Neek Report Period Due Date | | | | | | | | |
| List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lob | | | | | | | | |
| List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lob | | | | | | | | |
| List all employers/organizations that you represent as a lobbyist List all employers/organizations that you represent as a lobbyist Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If there was no activity or expenditures, indicate Lobbying activity summary - If the activity summary | | | | | | | | |
| List all employers/organizations that you represent as a lobbyist Jose Attached 4. 2. 5. 3. 6. Lobbying activity summary - If there was no activity or expenditures, indicate none." NONE Expenditures or expenditures, including compaign contributions, mark here: ou spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following egories per each employer you represent. Complete and attach Schedule A to this report. Lodding Employer 1 Employer 2 Employer 3 Employer 4 Employer 5 Employer 6 Total Expended Meals and Beverages S S S S S S S S S S S S S S S S S S S | | | | | | | | |
| 2 | | - | | | | | | |
| 2 | | | | | | | | |
| 2 | the additional a | | 26 | | | | | |
| 2 | USE DODALJONO! N | eporting John | if necessary. | | | | | |
| Expenditures o expenditures, including compaign contributions, mark here: ou spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following egories per each employer you represent. Complete and attach Schedule A to this report. lenditure Categories | | | | | | | | |
| Expenditures o expenditures, including compaign contributions, mark here: ou spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following egories per each employer you represent. Complete and attach Schedule A to this report. lenditure Categories | | | | | | | | |
| Expenditures o expenditures, including compaign contributions, mark here: | | | | | | | | |
| Expenditures o expenditures, including compaign contributions, mark here: | | | T | | | | | |
| Expenditures o expenditures, including compaign contributions, mark here: | | | | | | | | |
| Expenditures o expenditures, including compaign contributions, mark here: | | | | | | | | |
| o expenditures, including compaign contributions, mark here: | | | | | | | | |
| o expenditures, including compaign contributions, mark here: | | | | | | | | |
| o expenditures, including compaign contributions, mark here: | | | | | | | | |
| o expenditures, including compaign contributions, mark here: | | | | | | | | |
| ou spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following egories per each employer you represent. Complete and attach Schedule A to this report. Idenditure Categories | | | | | | | | |
| Employer | | | | | | | | |
| Meals and Beverages Employer 1 Employer 2 Employer 3 Employer 4 Employer 5 Employer 6 Total Expended Lodging S | st the amounts sp | pent in each of | the following | | | | | |
| Meals and Beverages \$ | | | - | | | | | |
| Lodging S S S S S S S S S | - | 1 | Total Expended | | | | | |
| Advertising S S S S S Travel S S S S S | 1 | | - | | | | | |
| Travel S S S S S S | | | THE RESERVE OF THE PERSON NAMED IN COLUMN 1 | | | | | |
| | | | The same of the sa | | | | | |
| | 15 | 5 | | | | | | |
| | | 1 | 5 | | | | | |
| | | - | | | | | | |
| Group Experiences | | 13 | - | | | | | |
| | 14 | Te | | | | | | |
| is sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and | | nediately above | | | | | | |
| IN CROSCOPER OF CONTRIBUTER TO 200 BLOWN BURDLOF STREET BYDENSES JIST THE TOTAL PYDENDED IN CRIEBUTY 25 IMPROVIDENT ADDVE. COMDIETE AND | DETERMINE | | | | | | | |
| TOTAL of all expenditures \$ \$ \$ | - | \$ category 5G imm | | | | | | |

List all Employer(s)/Organization(s) you represent as a lobbyist.

- Charles Town HBPA
- Humana
- 700400-Independent Oil & Gas Association of West Virginia Law Office of Philip A. Reale, PLLC

 - Little Kanawha River Parkway Authority
 - MultiState Associates on behalf of American Promotional Events
- Pharmaceutical Research and Manufacturers of America

- VISA, Inc.
 West Virginia Interactive, LLC
 West Virginia Beer Wholesaler Association
 WV Speech Language & Hearing Association
 WV Surety Bail Bonds Association

Ċ Total of all Expenditures from Schedule A and Schedule B:

Report all expenditures made by you and/or your employer on government officials and employees or members of their immediate families in furtherance of your lobbying activities. Do not report your compensation as a lobbyist or expenditures by you and/or your employer on your personal meal, lodging, travel or office support expenses.

| - | Ţ | 9 | TI | in | D. | C. | . B | Þ | | |
|---------------------------|---|----------------|-------|---------------|--------|-------------|------------|---------------------|---|---------|
| TOTAL of all expenditures | Group Expenditures (\$ from Schedule B) | Other Expenses | Glfts | Contributions | Travel | Advertising | Lodging | Meals and Beverages | | |
| | | | | | | | | | 1 | Empl |
| | | | | | | | | | 2 | Empi |
| | | | | | | | | | ω | Empl |
| | | | | | | | | | 4 | Empl |
| | | | | | | | | | 5 | Empl |
| | | | | | | | | | 6 | Empl |
| | | | | | | | | | | Empl |
| | | | | | | | | | 8 | Empl |
| | | | | | | | | | 8 | ol Empl |
| | - | | | | | | | | 5 | 1 |
| | | | | | | | | | ======================================= | emp! |
| | | | | | | | | | 12 | Empi |
| | | | | | | | | | 13 | Empl |
| | | | | | | | | | 74 | Empl |
| | | | | | | | | | Expended | Total |