Received

SEP 15 2020

West Virginia Ethics Commission

WV Ethics Commission

Lobbyist Activity Report Form

2020-02

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

West Virginia Eth	ics Commission					
Attn: Lobbyist Re	egistrar					
210 Brooks St., St	e. 300					
Charleston, WV	25301					
304-558-0664	No faxed copies	No faxed copies				
For office use only:						
Postmark	Rec'd					
Days late	Fine					

	· [· · · · · · · · · · · · · · · · · ·	,			()	,						
1. Name and contact information												
Name	Name Erin Osting Phone (415) 389-6800											
	Business Address C/o 2350 Kerner Blvd., Ste. 250 Business Email marathon@nmgovlaw.com											
busine	DUSTITESS AUGUESS ETTIBIT											
	San Rafael CA 94901											
City, State Zip San Rafael, CA 94901												
2. Reporting period for which this activity report is being filed												
Check	Report	Period	Due Date									
×	2020-2	5/1/20 - 8/31/20	9/15/2020									
	ļ											
						A SALES EN		L				
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.												
Marathon Petroleum Corporation												
1, Walathon Petroleum Corporation 4,												
2.	2 5											
2					•							
36												
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."												
None.												
5. Ex	penditure	s										
If no ex	xpenditure	s, including campal	gn contribution	ns, mark here:	1							
If you s	pent mone	ey on any public offi	cial, employee	or member of t	nis or her immed	diate family, list t	he amounts sp	ent in each of t	he following			
catego	ries per ea	ch employer you rep	present. Comp	lete and attach	Schedule A to the	his report.						
Expend	diture Cate	gories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended			
A.	Meals an	d Beverages	\$0	\$	\$	\$	\$	\$	\$0			
B.	Lodging		\$0	\$	\$	\$	\$	\$	\$0			
C.	Advertisis	ng	\$0	\$	\$	\$	\$	\$	\$0			
D.	Travel		\$0	\$	\$	\$	\$	\$	\$0			
E.	Gifts		\$0	\$	\$	\$	\$	\$	\$0			
F.	Other Exp	penses	\$0	\$	\$	\$	\$	\$	\$0			
G.	Group Ex	penditures	\$0	\$	\$	\$	\$	\$	\$0			
H.	Campaign	Contributions	LIST AMOUN	T IN "TOTAL EX	PENDED" COLU	MN.			\$0			
1.		all expenditures	\$0	\$	\$	\$	\$	\$	\$0			
If you s	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.												