SEP 01 2020

WV Ethics Commission

West Virginia Ethics Commission

attach a Schedule B for each event.

Lobbyist Activity Report Form

2020-02

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

West Virginia Ethics Commission

Days late_

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

1. Name and contact information									
Name L Gil White					Phone 3042806966				
Business Address P.O. Box 1588					gil white@stantag johnson.com				
Business Address P.O. Box 1588 Business Email gil.white@steptoe-johnson.com									
City, State Zip Charleston WV 25326									
2. Reporting period for which this activity report is being filed									
Check	· · · · · · · · · · · · · · · · · · ·	Due Date		7-7-1		T	1		
X	2020-2 5/1/20 - 8/31/20	9/15/2020	THE REAL PROPERTY OF THE						
		7,20,20							
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.									
2 American Public Education, Inc 5. Caiman Energy LLC									
Antero Resources 6 CGI Technology & Solutions									
5									
4. Lobbying activity summary - If there was no activity or expenditures, Indicate "none."									
NONE 7) Credit Union League, WV 8) CVS Health 9) Encova 10) Facebook 11) Motorola Solutions									
12) Northeast Natural Energy 13) NFIB 14) Pepsico 15) WV Press Assoc 16) Primecare 17) Global Tel Link Corp									
18) WV Society of Anesthesiologists 19) Aetna 20) Trulieve WV 21) UTEC 22) Westlake Chemical 23) Wheeling Hospital 24) Mountaineer Park Inc.									
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.									
-	nditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages	\$	\$	\$	\$	Ś	Ś	S	
В.	Lodging	\$	S	\$	S	S	\$	S	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Contributions	LIST AMOUN	T IN "TOTAL EX	PENDED" COLU	MN.	MANAGEMENT AND		\$1000.00	
1.	TOTAL of all expenditures	\$	\$	Ś	Ś	Ś	Ś	\$1000.00	

If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and