Received

APR 30 2021

WV Ethics Commission

West Virginia Ethics Commission

Lobbyist Activity Report Form

2021-01

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 Fine

1. Na	ame and co	intact information							
Name	Valerie N	M. Antonette				Phone '	412-491-2899	9	
Address 711 E. McMurray Road						Email valerie@bntyinv.com			
Addres	S					Email _			
City, St	ate Zip Ca	anonsburg, PA 15	317						
2. Re	eporting pe	riod for which this	activity repor	t is being filed					
Check	Report	Period	Due Date						
X	2021-01	1/1/21 - 4/30/21	5/17/21						
				4					
3. Lis	st all emplo	yers/organizations	that you repr	esent as a lobb	yist	Us	e additional rep	oorting forms i	f necessary.
4	Bounty Mi	nerals			4				
			A		4.				
2.	National A	Assn of Royalty Ow	vners - Appai	achia Chapter	5				
-									
					6				
3.									
		ivity summary - If th	here was no a	ctivity or exper	nditures, indicat	e "none."			
4. Lo	obbying acti	ivity summary - If th							
4. Lo	obbying acti								
4. Lo	obbying acti	ivity summary - If th							
4. Lo	obbying acti	ivity summary - If th							
4. Lo	obbying acti	ivity summary - If th							
4. Lo Advo	obbying acti	ivity summary - If the repassage of roy							
4. Lo Advo	obbying action ocating for spenditures	ivity summary - If the repassage of roy	yalty and m	ineral owner	protection la	ws			
A. Lo Advo	obbying action cating for spenditures spen	ivity summary - If the repassage of roy	yalty and m	ns, mark here:	protection la	diate family, list	the amounts sp	ent in each of t	the following
Advo	obbying action cating for spenditures spen	ivity summary - If the repassage of roy	yalty and m	ns, mark here: or member of plete and attach	protection la	diate family, list this report.			,
Advo	obbying action cating for spenditures spen	ivity summary - If the repassage of roy of row of r	yalty and m	ns, mark here:	protection la	diate family, list	the amounts sp	Employer 6	Total Expende
Advo	pobbying action of the company of th	ivity summary - If the repassage of roy of row of r	gn contributio cial, employee present. Comp Employer 1	ns, mark here: or member of olete and attach Employer 2	his or her immed Schedule A to t Employer 3	diate family, list this report. Employer 4	Employer 5	Employer 6	Total Expende
A. Lo Advo	pobbying action of the control of th	ivity summary - If the repassage of roy in passage of roy in passa	gn contributio cial, employee present. Comp Employer 1 \$	ns, mark here: or member of olete and attach Employer 2	his or her immed Schedule A to t Employer 3 \$	diate family, list this report. Employer 4 \$	Employer 5 \$	Employer 6 \$	Total Expende
A. Lo Advo	penditures expenditures expenditures expenditures expenditures expenditures expenditures expenditures expenditures expenditure	r passage of roy in passage of roy in including campaig y on any public office themployer you rep gories I Beverages	gn contributio cial, employee present. Comp Employer 1 \$ \$	ns, mark here: or member of blete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$	diate family, list this report. Employer 4 \$ \$ \$	Employer 5 \$ \$	Employer 6 \$ \$	Total Expende \$ \$ \$
A. Lo Advo	openditures expenditures expenditures expenditures expenditure diture Catego Meals and Lodging	r passage of roy in passage of roy in including campaig y on any public office themployer you rep gories I Beverages	gn contributio cial, employee present. Comp Employer 1 \$	ns, mark here: or member of olete and attach Employer 2	his or her immed Schedule A to t Employer 3 \$ \$ \$ \$	diate family, list this report. Employer 4 \$ \$ \$ \$	Employer 5 \$ \$ \$	Employer 6 \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$
A. Lo Advo	penditures expenditures expenditures expenditures expenditure Catego Meals and Lodging Advertisin	r passage of roy in passage of roy in including campaig y on any public office themployer you rep gories I Beverages	gn contributio cial, employee present. Comp Employer 1 \$ \$	ns, mark here: or member of blete and attach Employer 2 \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$	diate family, list this report. Employer 4 \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$
A. Lo Advo 5. Ex If no ex If you s categor Expend A. B. C. D. E.	penditures expenditures expenditures expenditure Catego Meals and Lodging Advertisin Travel	ivity summary - If the repassage of roy for passage of roy for its passage of the employer you repay for its passage of the passage of the employer you repay for its passage of the passage of	gn contributio cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$ \$	ns, mark here: or member of elete and attach Employer 2 \$ \$ \$ \$ \$ \$	his or her immen Schedule A to t Employer 3 \$ \$ \$	diate family, list this report. Employer 4 \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Advo	penditures spenditures spent mone ries per eac diture Categ Meals and Lodging Advertisin Travel Gifts Other Exp	ivity summary - If the repassage of roy for passage of roy for its passage of the employer you repay for its passage of the passage of the employer you repay for its passage of the passage of	gn contributio cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$	ns, mark here: or member of elete and attach Employer 2 \$ \$ \$ \$ \$	his or her immed Schedule A to t Employer 3 \$ \$ \$	diate family, list this report. Employer 4 \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
A. Lo Advo	penditures expenditures expenditures expenditures expenditure Category Meals and Lodging Advertisin Travel Gifts Other Exp	ivity summary - If the repassage of roy repassage of roy is, including campaigners of the employer you repagaries Beverages	gn contributio cial, employee present. Comp Employer 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ns, mark here: or member of olete and attach Employer 2 \$ \$ \$ \$ \$ \$ \$	his or her immen Schedule A to t Employer 3 \$ \$ \$	diate family, list his report. Employer 4 \$ \$ \$ \$ \$ \$ \$ \$	Employer 5 \$ \$ \$ \$ \$ \$ \$	Employer 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Total Expende \$ \$ \$ \$ \$ \$ \$ \$ \$ \$