West Virginia Ethics Commission

Lobbyist Activity Report Form

2022-01

West Virginia Ethics Commission Attn: Lobbyist Registrar 210 Brooks St., Ste. 300 Charleston, WV 25301 304-558-0664

For office use only:
Postmark ____

Days late

No faxed copies

Rec'd

Fine

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

1. Name and contact information										
Name Matthew Magner						Phone 703-600-1186				
Address 100 Dangerfield Road						Email matthew.magner@ncpa.org				
City, State Zip Alexandria, VA 22314 RECEIVED										
City, State 2ip - 100/00/1031						By Ethics Commission at 10:01 am, May 06, 2022				
2. Reporting period for which this activity report is being filed										
Check Report Period Due Date										
X	2022-1	1/1/22-4/30/22	5/16/22							
	1	2,2,22 1,00,11	5, 25, 22	THE HOUSE LEVE			1			
	1				ALL DENSITY					
3. List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.										
1. National Community Pharmacists Association 4.										
2										
36,										
J										
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."										
Submitted a letter to Gov. Justice urging him to sign HB 4112.										
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.										
Expenditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended		
A.		Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C	Advertisin	g	\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	\$	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Exp		\$	\$	\$	\$	\$	\$	\$	
G.	Group Exp		\$	\$	\$	\$	\$	\$	\$	
H.		Contributions			PENDED" COLU	MN.			\$	
1.									\$0.00	
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.