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**West Virginia Ethics Commission** 

## **Lobbyist Activity Report Form**

2023-01

**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 Days late

| Late reporting line - \$10 per business day past the due date (\$250 maximum)  |                           |            |                |               |                                      |            |            |                |  |
|--|---------------------------|------------|----------------|---------------|--------------------------------------|------------|------------|----------------|--|
| 1. Name and contact information  |                           |            |                |               |                                      |            |            |                |  |
| Name Conrad Lucas  |                           |            |                |               | Phone 304-962-2567                   |            |            |                |  |
| Address P.O. Box 11059   |                           |            |                |               |                                      |            |            |                |  |
| Address 1.0. DOX 11033   |                           |            |                |               | Email clucas@capitolresourcesllc.com |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
| City, State Zip Charleston, WV 25339   |                           |            |                |               |                                      |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
| 2. Reporting period for which this activity report is being filed  |                           |            |                |               |                                      |            |            |                |  |
| Check  | Report Period             | Due Date   |                |               |                                      |            |            |                |  |
| х  | 2023-01 1/1/23-4/30/23    | 5/15/23    | ]              |               | 72                                   |            |            |                |  |
|  |                           |            |                |               | - 7                                  |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
| 3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.   |                           |            |                |               |                                      |            |            |                |  |
| 1  | (see attached)            |            |                |               |                                      |            |            |                |  |
| _  |                           |            |                |               |                                      |            |            |                |  |
| 2 5  |                           |            |                |               |                                      |            |            |                |  |
| 3.   | 36                        |            |                |               |                                      |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
| 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."  |                           |            |                |               |                                      |            |            |                |  |
| Meeting with legislators to discuss pending legisaltion for the 2023 session   |                           |            |                |               |                                      |            |            |                |  |
| incerting with registators to discuss pending regisation for the 2023 session  |                           |            |                |               |                                      |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
|  |                           |            |                |               |                                      |            |            |                |  |
| 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. |                           |            |                |               |                                      |            |            |                |  |
|  | diture Categories         | Employer 1 | Employer 2     | Employer 3    | Employer 4                           | Employer 5 | Employer 6 | Total Expended |  |
| A.   | Meals and Beverages       | \$         | \$             | \$            | \$                                   | Ś          | \$         | \$140.00       |  |
| В.   | Lodging                   | \$         | \$             | S             | \$                                   | \$         | \$         | \$             |  |
| C.   | Advertising               | \$         | \$             | \$            | \$                                   | \$         | \$         | \$             |  |
| D.   | Travel                    | \$         | \$             | \$            | \$                                   | \$         | \$         | \$             |  |
| E.   | Gifts                     | \$         | \$             | \$            | \$                                   | \$         | \$         | \$             |  |
| F.   | Other Expenses            | \$         | \$             | \$            | \$                                   | \$         | \$         | \$             |  |
| G.   | Group Expenditures        | \$         | \$             | \$            | \$                                   | \$         | \$         | \$             |  |
| H.   | Campaign Contributions    | LIST AMOUN | T IN "TOTAL EX | PENDED" COLUN | NN.                                  |            |            | \$9,800.00     |  |
| 1.   | TOTAL of all expenditures | \$         | \$             | \$            | \$                                   | \$         | \$         | \$9,940.00     |  |
| 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.  |                           |            |                |               |                                      |            |            |                |  |

## **Conrad Lucas's Employer Representations**

- 1) Capitol Resources, LLC
- 2) Golden Horseshoe Strategies, LLC
- 3) Walgreens
- 4) Christian Healthcare Ministries
- 5) Frontier Communications Corporation Companies
- 6) GREY2KUSA Worldwide
- 7) Juul Labs, Inc
- 8) Learning.Com
- 9) Lexia Learning
- 10) Plasma Games
- 11) Study Edge
- 12) Texas Public Policy Foundation
- 13) Wetzel County Assessor's Office
- 14) The College Board
- 15) West Virginia Labs
- 16) Wonderschool

| Schedule B: Group Entertainment & Shared Expenses (Attach to the Lobbyist Activity Report)  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Instructions: Group Entertainment functions include only the functions that fall within the following groups. Report expenditures for a dinner party, reception or other similar function if you invited ALL members of any of these four specific groups. Individual names of attendees do not need to be listed for these four specific groups.   |  |  |  |  |  |  |  |
| <ol> <li>the Legislature</li> <li>a standing or select committee of either house</li> <li>either house of the Legislature</li> <li>a joint committee of both houses</li> </ol>  |  |  |  |  |  |  |  |
| Use the worksheet below to figure the amount spent on legislators and other governmental officials and employees for each "event." Enter this amount on the Lobbyist Activity Report.   |  |  |  |  |  |  |  |
| List each group event separately. <b>Make additional copies of this page</b> <i>if</i> <b>necessary</b> . Record total expenditures for each group event in <b>Section B</b> . You must then calculate and post on the Lobbyist Activity Report only the amount actually spent on public officials. If you share expenses with another reporting lobbyist, report only your portion of the expenses and list the names of other cosponsors in <b>Section C</b> below.               |  |  |  |  |  |  |  |
| Section A: Event Information  |  |  |  |  |  |  |  |
| Lobbying expenses for entertainment of "OTHER" group events are reported in the "Meals & Beverages" category on the Lobbyist Activity Report Form. List the names of attendees on this form or attach additional information pages. If using this form, list the names in item 5 below, as well as other event information requested in items 1 through 4 and complete the Section B calculations.  |  |  |  |  |  |  |  |
| 1. Date of event: 1/13/23 Location: House Health Committee Office   |  |  |  |  |  |  |  |
| 2. Type of event (reception, dinner, etc.): Lunch for House Health Committee Staff  |  |  |  |  |  |  |  |
| 3. Event sponsor: Golden Horseshoe Strategies, LLC  |  |  |  |  |  |  |  |
| 4. Which of the following governmental groups were invited? All members of:  a. the Legislature  b. either house of the Legislature  d. a joint committee of both houses  |  |  |  |  |  |  |  |
| OR  5. OTHER: If the event was not in one of the four specific groups listed above, you must list the names of all public employees or public officials in attendance here or on an attachment to this form. List attendees here:   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Section B: Calculate Reportable Expenses  Some calculations must be performed manually.   |  |  |  |  |  |  |  |
| 1. $\$140.00$ $\div$ $6$ = $\$23.33$ (per capita cost)  |  |  |  |  |  |  |  |
| 2. Number of governmental officials or employees in attendance:   |  |  |  |  |  |  |  |
| $\frac{5}{\text{(governmental attendees)}} \times \frac{116.66}{\text{(per capita cost)}} = BOX 1$  |  |  |  |  |  |  |  |
| If this was a true Group Entertainment event and you were the sponsor, report the amount above as Group Entertainment on the Lobbyist Activity Report in Section 5G. If you shared expenses with others, complete section C below, and report only your portion of the cost. Note: If you classified the expenditure described in section A as "OTHER," it is reported on the Lobbyist Activity Report Form as a Meals & Beverages expense (5A), not as a "Group Expenditure" (5G). |  |  |  |  |  |  |  |
| Section C: Shared Sponsorship Expenses  |  |  |  |  |  |  |  |
| 1. Were any other lobbyists co-sponsors of this event? No (yes or no)   |  |  |  |  |  |  |  |
| 2. If yes, with how many others are sharing the cost? N/A List the names of all sponsors below:   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| 3. What is your share of Box 1 above? \$ 140.00   |  |  |  |  |  |  |  |

Name: Conrad Lucas Date: 5/15/23