

# West Virginia Lobbyist Statement of Representation

Return this completed form and all attachments to: WV Ethics Commission 210 Brooks St., Suite 300 Charleston WV 25301

2005-2006

#### Important Filing Requirements for the Lobbyist

A fee of \$100.00 and this completed Statement of Representation (form-SOR1) for each entity that you represent as a lobbyist is required in addition to the initial \$100.00 base registration fee.

If this is an initial registration a completed Lobbyist Registration (LRS-1) must accompany this form

If this Statement of Representation is filed as an additional representation, an Amended Registration Form (ARS) must accompany this form.

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88 A	100

Name: Michae	l S. Garrison	Registra	ation number (	(if known)	200	-
Emall: mgarri	son@spilmanlaw.com	Phone : (304)	581-6979	Fax: (304)	599-1 <b>2</b> 45	5 <u>m</u>
. Represer	Ited Employer, Organ	nization or Associd through 2006 unless can	ciation in	formation ed before that time.	2 AM II: 24	
	of Employer, Organization or As ee Corporation	ssociation represented:			24	
Mailing address	The United Center, 3: 1085 VanVoorhis Road Morgantown, West Virg	rd Floor, Suite 3	90 phone: _ fax:	(304) 599–42 (304) 599–42	60 72	
Occupation or ty	pe of business: Timber I					
Provide a gener	al description of the subjects, top	pics or issues which will	be the focus o	of lobbying efforts		
	l Government Relations					
. Lobbyist	Information:					
Check only one:	Unpaid voluntee		are not limite	d to lobbying		
paid to the lobby	mployed or retained under any a vist is contingent upon the succe No No	ess of his or her lobbying	activity?	ling by which any	compensal	tion
. Employe	r certification:					
I certify that the le	r certification:  obbyist named above is authorized true, correct and complete. I have	to lobby on our behalf, and read the additional informa	tion on page 2	of this form.		nt of
I certify that the le	obbyist named above is authorized true, correct and complete. I have	to lobby on our behalf, and read the additional informa	tion on page 2	t of my knowledge, t of this form. 2 - 21-		nt of

Form SOR1 7/2005

ATTORNEYS AT LAW

(304) 581-6979 e-mail: mgarrison@spilmanlaw.com

February 27, 2006

WV Ethics Commission 210 Brooks Street, Suite 300 Charleston, WV 25301

> WV Lobbyist Statement of Representation Re:

Dear Sir or Madam:

Enclosed please find an executed West Virginia Lobbyist Statement of Representation to add ImageTree Corporation to my file. Also enclosed is a check for \$100.00 to process this request.

Thank you for your attention to this matter.

Very truly yours,

Michael S. Garrison

MSG/vsl:293752v1 Enclosures



#### West Virginia Lobbyist Statement of Representation

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Form SOR1 7/2005

2005-2006

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If this Statement of Representation is filed as an additional representation, an Amended Registration Form (ARS) must accompany this form.

I. Lobbyist name as listed on Lobb	yist Registration Form (form LRS-1) 事
Name: Michael S. Garrison	Registration number (if known)
Email: mgarrison@spilmanlaw.com	Phone: (304) 581-6979 Fax: (304) 599-1845 m
2. Represented Employer, Organiza  NOTE: This Representation Statement is valid thr	
Complete name of Employer, Organization or Associ	iation represented:
Mailing address: 325 Willey Street Morgantown, WV 26505	phone: (304) 292-0900 fax:
Occupation or type of business: Real Estate I	Development
Provide a general description of the subjects, topics	or issues which will be the focus of lobbying efforts
General Government Relations	
3. Lobbyist Information:	
Check only one:  Retained solely as I Unpaid volunteer Regular employee,	services include but are not limited to lobbying
Is the lobbyist employed or retained under any agree paid to the lobbyist is contingent upon the success o Yes Not ap	ement, arrangement or understanding by which any compensation of his or her lobbying activity?  OplicableX
I. Employer certification:	
I certify that the lobbyist named above is authorized to lo Representation is true, correct and complete. I have read	bby on our behalf, and that to the best of my knowledge, this Statement of the additional information on page 2 of this form.
Authorized Signature:	Date: <u>3-2-56</u>
Type or print name; Trichacl A	SIATORY Title: MANKER 87

ATTORNEYS AT LAW

(304) 581-6979

e-mail: mgarrison@spilmanlaw.com

March 23, 2006

WV Ethics Commission 210 Brooks Street, Suite 300 Charleston, WV 25301

> WV Lobbyist Statement of Representation Re:

Dear Sir or Madam:

Enclosed please find an executed West Virginia Lobbyist Statement of Representation to add Metro Rentals, LLC to my file. Also enclosed is a check for \$100.00 to process this request.

Thank you for your attention to this matter.

Very truly yours,

Michael S. Garrison

MSG/vsl:293752v14 Enclosures



# West Virginia Lobbyist Statement of Representation

Recum this completed form and all attachments to:
WV Ethics Commission
210 Brooks St., Suite 300
Charleston WV 25301

Form SOR1 7/2005

2005-2006

#### Important Filing Requirements for the Lobbyist

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If this Statement of Representation is filed as an additional representation, an Amended Registration Form (ARS) must accompany this form.

Human Resources



1. Lobb	yist name as listed on Lob	obyist Registration Form (form LRS-1)
Name:	Michael S. Garrison	Registration number (if known)
Email:	ngarrison@spilmanlaw.com	Registration number (if known)  Phone: (304) 581-6979 Fax: (304) 599-18
2. Repre	esented Employer, Organiz	through 2006 unless cancelled or changed before that time.
Complete s	name of Employer, Organization or Ass to Valley Health Servic	ociation represented: es and Education Corporation
Mailing ad	dress: 2000 Eoff Street Wheeling, WV 26	003 phone: (304) 234-8291 fax: (304) 234-8057
Occupation	n or type of business: medical	center
Provide a g	general description of the subjects, topic	cs or issues which will be the focus of lobbying efforts
Ge	eneral Government Relat	ions
3. L <b>o</b> bby	rist Information:	
Check only	Unpaid volunteer	ee, services include but are not limited to lobbying
baid to the	yist employed or retained under any agr loobyist is contingent upon the success No Not	reement, arrangement or understanding by which any compensation s of his or her lobbying activity?  applicablex
1. Empl	oyer certification:	
		lobby on our behalf, and that to the best of my knowledge, this Statement of ad the additional information on page 2 of this form.  Date: 2/5/06
	Signature: James R Stully	Title: Senior Vice President

Name: Michael S. Garrison	ii. (piease j E-m	p <b>rint or type)</b> ail: mgarrison@spilmanlav	v.com <> (** IMPORTANT >>>
Name to use on ID badge: Mike Gard			Please enclose: • Two 2 x 2 passport-type photos
Phone: ( 304 ) 285-1142	Fax ( <u>304</u>	) 599-8229	Check for registration fee:
Please use this address for all maili		ation:	\$60.00 for 2 yr. 2005/2006 or
Michael S. Garrison	NG ADDRESS.		\$30.00 if registering after 1/4/2006
990 Elmer Prince Drive, Suit	e 205	/////	Detailed instructions on back
Morgantown	WV	26505	If questions, call (304) 558-0584
(city)	(state)	(zip)	ornail: Isuchy@wvadmin.gov
Legislative session address and	phone:		
Business address	•		address (not published)
990 Elmer Prince Drive, Suite 205		344 Horseshoe Road	<u> </u>
P. O. Box 4474		Morgantown, WV 26	5508 -594-2811
Morgantown, WV 26504-4474		Phone: (304 )	594-2811
Phone: ( <u>304</u> ) <u>285–1142</u>		rnone. ( <u>504</u> )	
2. What topics or subjects will the lo	bbyist address on	behalf of the above Employe	or / Organization?
General Government Relations		A A A A A A A A A A A A A A A A A A A	
	obbying	Administrative Lobby	ing
General Government Relations  3. Check one or both: Legislative I  4. Check only one: Retained sol		Administrative Lobby  Unpaid volunteer	ing  ☑Retained to lobby in addition to performing other services
3. Check one or both: Legislative I	ely as lobbyist	Unpaid volunteer	Retained to lobby in addition to performing other services
3. Check one or both: Legislative I. 4. Check only one: Retained sol 5. If compensated, is any portion of the Retained sol  • Lobbyist Certification materials is true, correct and complete. I unincomplete report. I further understand the	ely as lobbyist  at compensation  No  To the best o	Unpaid volunteer  contingent upon the success of the contingent upon the success of the contingent upon the success of the contingent upon the success of the contingent upon the continge	Retained to lobby in addition to performing other services of the lobbying activity?  ion contained hereon and on any attached 3-9 to willfully and knowingly file a false or d, sentenced to jail, or both. I have read the
3. Check one or both: ✓ Legislative I. 4. Check only one: —Retained sol 5. If compensated, is any portion of the ✓ es  • Lobbyist Certification materials is true correct and complete I.u.	ely as lobbyist  at compensation  No  To the best o	Unpaid volunteer  contingent upon the success of the contingent upon the success of the contingent upon the success of the contingent upon the success of the contingent upon the continge	Retained to lobby in addition to performing other services of the lobbying activity?  ion contained hereon and on any attached 3-9 to willfully and knowingly file a false or

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3.7 8.85	_	tion: (please p	o <mark>rint or type)</mark> ail: mgarrison@spilmanla	<<< IMPORTANT >>>
			III: IIIgai iisoi i@spiiiiiailia	Please enclose:
Name to us	e on ID badge: Mike	Garrison	A CONTRACTOR OF THE PARTY OF TH	• ₹wo 2 x 2 passport-type photos
Phone:( <u>30</u>	) 285-1142	Fax ( <u>304</u>	) 599-8229	• Check for registration fee:
Pleas e use	this address for all 1	nailings and publica	tion:	\$60.00 for 2 yr. 2005/2006
		MAILING ADDRESS:		\$30.00 if registering after
	ichael S. Garrison  0 Elmer Prince Drive	Cuite 20E		1/1/2006
	organtown	Suite 205 WV	26505	Detailed instructions on back
(cit		(state)	(zip)	If questions, call (304) 558-0664 email: <u>lsuchy@wvadmin.gov</u>
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	ve session address iness address	and phone:	Residential	address (not published)
	r Prince Drive, Suite	205	344 Horseshoe Roa	
P. O. Box	I AND		Morgantown, WV 2	6508
	own, WV 26504-4474			
Phone: ( <u>3</u>	04 ) 285-1142		Phone: (304)_	594-2811
				ype of business or occupation of Employer:
		he lobbyist address on	behalf of the above Employ	-
	opics or subjects will t Government Relation	he lobbyist address on		
General		he lobbyist address on	behalf of the above Employ	er / Organization?
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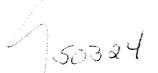
• •Lobbyist Information: (please print Name: Michael S. Garrison E-mail	r <b>int or type)</b> il: mgarrison@spilmanlaw	
Name to use on ID badge: Mike Garrison		Please enclose: • Two 2 x 2 passport-type photos
Phone: ( 304 ) 285-1142 Fax ( 304		Check for registration fee:     \$60.00 for 2 yr. 2005/2006
Please use this address for all mailings and publicate	tion:	or
MAILING ADDRESS:		\$30.00 if registering after
Michael S. Garrison		1/1/2006
990 Elmer Prince Drive, Suite 205		Detailed instructions on back
Morgantown WV	26505	If questions, call (304) 558-0664
(city) (state)	(zip)	email: <u>lsuchy@wvadmin.gov</u>
Legis lative session address and phone:	Residential a	ddress (not published)  Road  7. 26508
Business address 990 Elmer Prince Drive, Suite 205	344 Horseshoe	Road
	Morgantown, W	7 26508
P. O. Box 4474  Morganlown, WV 26504-4474	TANT ACTIONATIVE AND	2
Phone: (304 ) 285–1142	Phone: ( 304 )	594-2811
Phone. (304 ) 203 1142	/	
1618 Jacob Street Wheeling, West Virginia 26003  2. What topics or subjects will the lobbyist address on I		pe of business or occupation of Employer: r / Organization?
General Government Relations		
3. Check one or both: Legislative Lobbying	Administrative Lobby	ing
4. Check only one:	Unpaid volunteer	☑-Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation c ☐ Yes ☐ No	contingent upon the success of Mot applicable	of the lobbying activity ?
Lobbyist Certification: To the best of materials is true, correct and complete. I understand that it is incomplete report. I further understand that if I am convicted information on the back of this form.	s a violation of WW Lode bis-:	C-A TO MINIBA SHO KHOMBON ISC & INISC OF
Lobbyist Signature:		Date: 3/30/05
Employer Authorization (Origin.  The lobbyist named above is authorized to lobby or authorization remains in effect through year 2006 unless ten Employer Notice on the other silb of this form.  Authorized signature:	rour behalf in regard to the gminated in writing before that	general subjects listed on this form. This time. I have read and understand the late:  ### ### ############################
1 / 6 / 6	Tì	tle: Exec. Dini
Type or print name: Of the Collect		

Type or print name:



<ul> <li>Lobbyist Information:</li> </ul>	(please print or type)	!	<<< IMPORTANT >>>
Name: Michael S. Garrison	E-mail: mgarrison@	spirmaniaw.com	Please enclose:
Name to use on ID badge: Mike Garriso			• ₹wo 2 x 2 passport-type photos
Phone: (304) 285-1142	Fax (304 ) 599-8229		Check for registration fee:
Please use this address for all mailings			\$60.00 for 2 yr. 2005/2006 or
	ADDRESS:		\$30.00 if registering after
Michael S. Garrison	0.5		1/1/2006
990 Elmer Prince Drive, Suite 2	05 WV 26505		Detailed Instructions on back
Morgantown		zip)	If questions, call (304) 558-0664 email: lsuchy@wvadmib⊒gov
(city)	(State)	Zip)	SS S
Legislative session address and ph Business address	one:	esidential addres	s (not published)
990 Elmer Prince Drive, Suite 205	692 Onal	iska Road	
P. O. Box 4474		WV 26554	<b>3</b>
Morgantown, WV 26504-4474	Phone: (30-		0591
Phone: ( <u>304</u> ) <u>285–1142</u>	1 none. ( <u>30</u>	1 300	0591 <b>8:</b> 51
2. What topics or subjects will the lobby Permitting and regulatory			ganization? 65
3. Check one or both: Legislative Lob	bying  Administr	ative Lobbying	
4. Check only one: Retained solely		volunteer <b>Z</b> -R	etained to lobby in addition to performing other services
5. If compensated, is any portion of that c	compensation contingent upon No Not appli	the success of the cable	lobbying activity?
•Lobbyist Certification: aterials is true, correct and complete. I unde complete report. I further understand that if formation on the back of this form.	retand that it is a violation of W	V Code 6B-3-9 to I can be fined, ser	willfully and knowingly file a false of the standard to jail, or both. I have read the
obbyist Signature:		I	Date: 2/11/05
• • Employer Authorizati The lobbyist named above is author uthorization remains in effect through year 2	in will to labby on our habalf in re	agard to the gener:	al subjects listed on this form. This I have read and understand the
uthorization remains in effect through year 2 imployer Notice on the other side of this for	. <b>900</b> аноза юнинаюсь в миш Пр.		
The state of the s	1		1/10/05

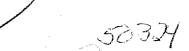
- *Lobbyist Information: (please print or type)  Name: Michael S. Garrison	
Name to use on ID badge: Mike Garrison Phone: (304 ) 285-1142 Fax (304 ) 599-8229 Please use this address for all mailings and publication:    Mailing Address   Mike Garrison	116
Name to use on ID badge: Mike Garrison  Phone: ( 304	
Please use this address for all mailings and publication:    Mail	эе
Michael S. Garrison  990 Elmer Prince Drive, Suite 205  Morgantown  (city)  (c	
Michael S. Garrison  990 Elmer Prince Drive, Suite 205  Morgantown  (city)  Legislative session address and phone:  Business address  990 Elmer Prince Drive, Suite 205  P.O. Box 4474  Morgantown, WV 26504-4474  Phone: (304 ) 285-1142  Phone: (304 ) 366-0591  **Employer / Organization Information: (one employer per form)  1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  Canden-Clark Memorial Hospital Phone: (304 ) 424-2204  P.O. Box 718  Parkersburg, W 26102  2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  31. Check one or both: Legislative Lobbying  42. Check only one: Retained solely as lobbyist Unpaid volunteer Retained to lobby in addition to performing other services  5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?  **Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attack.	106
Detailed instructions on bat If questions, call (304) 558-0 email: isuchy@wvadmin.gov  Legislative session address and phone: Business address  990 Elmer Prince Drive, Suite 205  P. O. Box 4474  Morgantown, WV 26504-4474  Phone: (304 ) 285-1142  Phone: (304 ) 285-1142  Phone: (304 ) 366-0591  *Employer / Organization Information: (one employer per form)  1. Name and complete address of the employer, organization or association that the LOBBYIST represents: Canden-Clark Memorial Hospital Box Garfield Avenue P. O. Box 718 Parkersburg, WV 26102  2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  Health-care financing and development issues  3. Check one or both: Legislative Lobbying 4. Check only one: Retained solely as lobbyist West Cartification: To the best of my knowledge, the information contained hereon and on any attace  *Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attace  *Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attace  *Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attace  *Lobbyist Certification is a false with the lobbying and interest of the part of the property of the success of the lobbying activity?  *Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attace  *Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attace and the property of the part of the p	fter
Morgantown	
Legislative session address and phone: Business address 990 Elmer Prince Drive, Suite 205 P. O. Box 4474 Morgantown, WV 26504-4474 Phone: ( 304 ) 285–1142 Phone: ( 304 ) 285–1142  Phone: ( 304 ) 366–0591  1. Name and complete address of the employer, organization or association that the LOBBYIST represents: Camden-Clark Memorial Hospital Phone: ( 304 ) 424–2204 800 Garfield Avenue P. O. Box 718 Parkersburg, WV 26102  2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  Health-care financing and development issues  3. Check one or both:   Legislative Lobbying   Legi	
Legislative session address and phone: Business address 990 Elmer Prince Drive, Suite 205  P. O. Box 4474  Phone: ( 304	004
Business address  990 Elmer Prince Drive, Suite 205  P. O. Box 4474  Morgantown, WV 26504-4474  Phone: ( 304	
990 Elmer Prince Drive, Suite 205 P. O. Box 4474 Morgantown, WV 26504-4474 Phone: ( 304	
P. O. Box 4474  Morgantown, WV 26504-4474  Phone: ( 304	
Morgantown, WV 26504-4474  Phone: ( 304	
Phone: (304 ) 285-1142 Phone: (304 ) 366-0591  • Employer / Organization Information: (one employer per form)  1. Name and complete address of the employer, organization or association that the LOBBYIST represents:     Camden-Clark Memorial Hospital Phone: (304 ) 424-2204  800 Garfield Avenue Fax: (304 ) 424-2782  P. O. Box 718  Parkersburg, WV 26102  2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  Health-care financing and development issues  3. Check one or both: Legislative Lobbying Administrative Lobbying  4. Check only one: Retained solely as lobbyist Unpaid volunteer Preforming other services  5. If compensated, is any pertion of that compensation contingent upon the success of the lobbying activity?  Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attace where the statement that the principle of WV Code 8B-3-9 to willfully and knowledge flee a false.	
• Employer / Organization Information: (one employer per form)  1. Name and complete address of the employer, organization or association that the LOBBYIST represents:    Camden-Clark Memorial Hospital	_
1. Name and complete address of the employer, organization of association and the LobBritish representations of the campens of the compensation of association and the transfer of the campens of the campens of the compensation of association of association and the compensation of association of association and the compensation of association of the campens of the c	WV ETHER
<ul> <li>3. Check one or both:  Legislative Lobbying  Lobbyin</li></ul>	
<ul> <li>4. Check only one:  ☐ Retained solely as lobbyist ☐ Unpaid volunteer ☐ Retained to lobby in addition to performing other services</li> <li>5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?</li> <li>For ☐ No ☐ Not applicable</li> <li>Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attaction of the lobbying activity and knowledge at the information contained hereon and on any attaction of the lobbying activity and knowledge at the information contained hereon and on any attaction of the lobbying activity and knowledge at the lobbying activity?</li> </ul>	3 17;
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that it is a violation of MM/ Code 68-3-9 to William And Knowlide a large	
Incomplete report. I further understand marks and convocation on the back of this form  Lobbyist Signature:  Date:	; ()
• Employer Authorization (Original signature required)     The lobbyist named above is authorized to lobby on our behalf in regard to the general subjects listed on this form. The authorization remains in effect through year 2006 unless terminated in writing before that time. I have read and understand the	
Employer Notice on the other side of this form.	is
Authorized signature: Date: January 11, 2005	is
Type or print name: Thomas N Corder Title: President & CEO	is



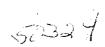
• •Lobbyist Information: (ple	ase print or type)	<<< IMPORTANI>>>
Name: Michael S. Garrison	E-mail: mgarrison@spilmanlaw.cor	n l
Name to use on ID badge: Mike Garrison		Please enclose: • Two 2 x 2 passport-type photos
Phon e: (304 ) 285-1142 Fax (	304)_599-8229	Check for registration fee:
Please use this address for all mailings and p	oublication:	\$60.00 for 2 yr. 2005/2006 or
MAILING ADDRES	SS:	\$30.00 if registering after
Michael S. Garrison	The state of the s	1/1/2006
990 Elmer Prince Drive, Suite 205 Morgantown W	V 26505	Detailed instructions on back
(city) (stat		If questions, call (304) 55850664 memail: lsuchy@wvadmin.gov
(60)	7 11.	8
Legislative session address and phone:		9
Business address	Residential addre	ess (not published)
990 Elmer Prince Drive, Suite 205	000 0 -1:1-	
P. O. Box 4474	682 Opekiska Road Fairmont, WV 26554	
Morgantown, WV 26504-4474	The state of the s	-0591 <b>3</b>
Phone:( 304 ) 285-1142	Flione: (304 ) 300	<u> </u>
2. What topics or subjects will the lobbyist addr	ress on behalf of the above Employer / O	rganization? 134?
General Government Relations		
3. Check one or both: Legislative Lobbying	Administrative Lobbying	
4. Check only one:  PRetained solely as lobb	yist 🕒 Unpaid volunteer 🔼	Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensated	sation contingent upon the success of the	lobbying activity?
Yes No	Midot applicable	
•Lobbyist Certification: To the materials is true, correct and complete. I understand incomplete report. I further understand that if am coinformation on the back of this forth.	best of my knowledge, the information of that it is a violation of WV Code 6B-3-9 to privided of such an act, I can be fined, se	ontained hereon and on any attached willfully and knowingly file a false or ntenced to jail, or both. I have read the
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• •Lobbyist Information: (pleas Name: Michael S. Garrison E	se print or type) -mail: mgarrison@spilmanlaw.com	Z; ib t
Name to use on ID badge: Mike Garrison		Please enclose: • Two 2 x 2 passport-type photos
Phone: (304) 285-1142 Fax (304	4) 599-8229	Check for registration fee:
Please use this address for all mailings and pub  MAILING ADDRESS:  Michael S. Garrison		\$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006
990 Elmer Prince Drive, Suite 205  Morgantown WV  (city) (state)	26505 (zip)	Detailed instructions on back If questions, call (304) 558-0664 email: lsuchy@wvadmin.gov
Legislative session address and phone:  Business address 990 Elmer Prince Drive, Suite 205	Residential address	
P. O. Box 4474	682 Opekiska Road Fairmont, WV 26554	<u> </u>
Morgantown, WV 26504-4474 Phone: (304) 285-1142	Phone: (304 ) 366-	0591
13 Kanawha Boulevard, West Suite 300, P. O. Box 11848 Charleston, WV 25339=1848  2. What topics or subjects will the lobbyist address General Government Relations		business or occupation of Employer:
3. Check one or both: ✓ Legislative Lobbying	Administrative Lobbying	
4. Check only one: Pretained solely as lobbyis	t	etained to lobby in addition to erforming other services
<ol> <li>If compensated, is any portion of that compensation of the compensation</li></ol>	ion contingent upon the success of the l	obbying activity ?
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• I obbvist I	nformation: (ple	ase print or type)	
Name: Michael S. G		E-mail: mgarrison@spilmanlaw.c	
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Phone: (304)	285-1142 Fax (3	304 ) 599-8229	Check for registration fee:
Please use this addre	ess for all mailings and p	ublication:	\$60.00 for 2 yr. 2005/2006
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Morgantown	rince Drive, Suite 205 W\	/ 26505	Detailed instructions on back
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Phone: ( 304 )	285-1142	Phone: (304 ) 36	66-0591  Ter per form)  LOBBYIST represents: 304
,	bjects will the lobbyist addro	ess on behalf of the above Employer /	Organization?
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3. Check one or both	: Legislative Lobbying	Administrative Lobbying	g
4. Check only one:	Retained solely as lobby	yist Unpaid volunteer	Z-Retained to lobby in addition to performing other services
5. If compensated, is	any portion of that compens	ation contingent upon the success of	the lobbying activity ?
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Authorized signature:	Scott Rotruck	Date:	12/28/04 President
Type or print name:	· SCOTI KOTALCK	Title	· MICSIAPNIT



• •Lobbyist Inf Name: Michael S. Garr	ormation: (please p	rint or type) iil: mgarríson@spilmanlav	v.com <<< IMPORTANT >>>
Name to use on ID badg			Please enclose: • Two 2 x 2 passport-type photos
Phone: (304) 28	5-1142 Fax ( <u>304</u>	) 599-8229	• Check for registration fee:
Please use this address	for all mailings and publica	tion:	\$60.00 for 2 yr. 2005/2006
	MAILING ADDRESS:	**************************************	or \$30.00 if registering after
Michael S. Gar			1/1/2006
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(city)	(state)	(zìp)	email: isuchy@wvadmin.gov
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Legislative session a  Business address		Residential	address (not published)
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P. O. Box 4474		682 Opekiska Road	2005 F.
Morgantown, WV 265	1 11 20 31 31	Fairmont, WV 2655	<del>'</del>
Phone: ( <u>304</u> )	285-1142	Phone: ( <u>304</u> )	366-0591 <b>平</b> 元㎡
1500 Corporate Canonsburg, PA  2. What topics or subjections	ories, Inc. Drive, Suite 400	• •ry	pyer per form)  the LOBBYIST represents:  (724 ) 514–1837 8  (724 ) 514–1873 8  Type of business or occupation of Employer:  er / Organization?  /34
3. Check one or both:	Legislative Lobbying	Administrative Lobby	ing
4. Check only one:	Retained solely as lobbyist	Unpaid volunteer	Retained to lobby in addition to performing other services
• •	y portion of that compensation collection collections	ontingent upon the success of Not applicable	of the lobbying activity ?
materials is true, correct and incomplete report. I further i information on the back of the	I complete. I understand that it is understand that if I am convicted	a violation of WV Code 6B- of such an act, I can be fine	ion contained hereon and on any attached 3-9 to willfully and knowingly file a false or d, sentenced to jail, or both. I have read the
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• Lobbyist Information		rint or type)		<<< IMPORTANT >>>
Name: Michael S. Garrison	E-ma	il: mgarrison@spi	imaniaw.com	
Name to use on ID badge: Mike Ga	rrison			Please enclose: • Two 2 x 2 passport-type photos
Phone: ( <u>304</u> ) <u>285-1142</u>	Fax ( <u>304</u>	) _599-8229		Check for registration fee:
Please use this address for all mai	lings and publica	tion:		\$60.00 for 2 yr. 2005/2006
MAI	LING ADDRESS:			or \$30.00 if registering after
Michael S. Garrison				1/1/2006
990 Elmer Prince Drive, Su	ite 205			Detailed instructions on back
Morgantown	W	26505		If questions, call (304) 558-0664
(city)	(state)	(zip)		emall: <u>Isuchy@wvadmin.gov</u>
Legislative session address an Business address	d phone:	Resid	dential addres	s (not published)
990 Elmer Prince Drive, Suite 205				
P. O. Box 4474		682 Opekiska	a Road	<b>B</b>
Morgantown, WV 26504-4474		Fairmont, W\		1.35
Phone: (304) 285-1142		Phone: (304	) 366-	
				per form)  BYIST represents: 4 ) 284–5000
c/o Petroplus & Associ P. O. Box 679 Morgantown, WV 26507- 2. What topics or subjects will the I Commercial Development	-0679 obbyist address on t	behalf of the above		tanization?
3. Check one or both: Legislative	Lobbying	<b>✓</b> •Administrativ	e Lobbying	
4. Check only one: Retained so	olely as lobbyist	☐ Unpaid volu	nteer <b>Z</b> Re	etained to lobby in addition to erforming other services
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• Employer Authoriz     The lobbyist named above is an authorization remains in effect through y Employer Notice on the other side of the side.	uthorized to lobby or ear 2006 unless ten	n our behalf in regar	d to the genera	l subjects listed on this form. This I have read and understand the
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Authorized signature;	17 (Lag			
Type or print name:			Title;	



• •Lobbyist Informat	ion: (please p	rint or type)	<<< IMPORTANT >>>
Name: Michael S. Garrison	E-mai	il: mgarrison@spilmanlav	
Name to use on ID badge: Mike	<u> </u>		Please enclose:  • ₹wo 2 x 2 passport-type photos
Phone: ( 304 ) 285-1142	Fax ( <u>304</u>	) 599-8229	Check for registration fee:
Please use this address for all m	ailings and publica	tion:	\$60.00 for 2 yr. 2005/2006
	IAILING ADDRESS:		\$30.00 if registering after
Michael S. Garrison			1/1/2006
990 Elmer Prince Drive,			Detailed instructions on back
Morgantown	WV	26505	If questions, call (304) 55 664
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Morgantown, WV 26504-4474		Fairmont, WV 26554	4 <b>3</b> 366-0591 <b>3</b> 39
Phone: (304) 285–11	42	Phone: (304 )	366-0591 : 5
) 1010.	<u> </u>		<b>~</b> =
Spilman Thomas & Bat P. O. Box 273 Charleston, WV 2532 2. What topics or subjects will the General Government	21 ne lobbyist address on t	Fax: • •Ty	$\frac{(304)}{304} \xrightarrow{340-3800}$ The of business or occupation of Employer: $\frac{(304)}{304} \xrightarrow{340-3801}$ The of business or occupation of Employer: $\frac{(304)}{304} \xrightarrow{340-3801}$
3. Check one or both: Legislat	ive Lobbying	Administrative Lobby	ring
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5. If compensated, is any portion of Lives	of that compensation c	ontingent upon the success  [Z]Not applicable	of the lobbying activity?
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Authorized signature:	1. /-45, le		ate: 1/4/05
Type or print name: Myher!	T Braile	T	itle: MANAGING Member



• •Lobbyist Informa	tion: (please pr	int or type)	<<< IMPORTANT.>>>
Name: Michael S. Garrison	E-mai	l: mgarrison@spilmanlav	
Name to use on ID badge: Mike	Garrison	,	Please enclose:  • ₹wo 2 x 2 passport-type  photos
Phone:(304) 285-1142	Fax ( <u>304</u>	) 599-8229	Check for registration fee:
Please use this address for all n	iailings and publicat	ion:	\$60.00 for 2 yr. 2005/2006
	MAILING ADDRESS:		or \$30.00 if registering after
Michael S. Garrison			1/1/2006
990 Elmer Prince Drive,			Detailed instructions on back
Morgantown	WV	26505	If guestions, call (304) 558-0664
(city)	(state)	(zip)	email: <u>Isuchy@wvadmin.gov</u>
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990 Elmer Prince Drive, Suite	205	100000man	
P. O. Box 4474		682 Opekiska Road	<b>#</b>
Morgantown, WV 26504-4474		Fairmont, WV 26554	4 9
Phone: (304) 285-11		Phone: (304 )	366-0591 _
7 110120. ( 504 ) 200 11			oyer per form)  le LOBBYIST represents:
1000 Technology Driver Fairmont, WV 26554  2. What topics or subjects will to	he lobbyist address on b		rpe of business or occupation of Employer:  er / Organization?
Healthcare, Busine	ss, Budgetary		149
3. Check one or both: Legisla	tive Lobbying	Administrative Lobby	ring
4. Check only one:•Retaine	d solely as lobbyist	Unpaid volunteer	Retained to lobby in addition to performing other services
5. If compensated, is any portion	of that compensation co	ontingent upon the success of Not applicable	of the lobbying activity?
	e. I understand that it is not that if I am convicted	a violation of MM Cade 68	ion contained hereon and on any attached 3-9 to willfully and knowingly file a false or d, sentenced to jail, or both. I have read the  Date:
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( )	A amount	D:	ate: 12/27/04
Authorized signature:	- A		ate: 12/27/04 itle: freq. 12-2/CEO
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Authorized signature: \(\frac{1}{2}\)

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• • Lobbyist Information: (please print or type) Name: Michael S. Garrison	m   <<< IMPORTANT.>>>  Please enclose:
	Dlagge ampletes
	• Two 2 x 2 passport-type
Phone: (304) 285-1142 Fax (304) 599-8229	Check for registration fee:
Please use this address for all mailings and publication:	\$60.00 for 2 yr. 2005/2006 or
MAILING ADDRESS:	\$30.00 if registering after 1/1/2006
Michael S. Garrison	1/1/2006
990 Elmer Prince Drive, Suite 205  Morgantown WV 26505	Detailed instructions on back If questions, call (304) 558-0664
(city) (state) (zip)	email: <u>Isuchy@wvadmin.gov</u>
Legislative session address and phone:  Business address  Residential addr	ress (not published)
990 Elmer Prince Drive, Suite 205 682 Opekiska Road	
P. O. Box 4474 Fairmont, WV 26554	
Margantown MM/ 26504-4474	View Programmer Control of the Contr
Phone: (304 ) 285-1142 Phone: (304 ) 36	66-0591 o
2. What topics or subjects will the lobbyist address on behalf of the above Employer / C	OBBYIST represents: 04 ) 599-1232 = 500   500
General Government Relations	
3. Check one or both: Legislative Lobbying Administrative Lobbying	
4. Check only one: Retained solely as lobbyist Unpaid volunteer	Retained to lobby in addition to performing other services
5. If compensated, is any pertion of that compensation contingent upon the success of the Not applicable	
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Lobbyist Signature:	Date: 2/14/05

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Lobbyist Information: (please print or t	ype) <<< IMPORTANT >>> son@spilmaniaw.com
Name: Michael S. Garrison E-mail: mgarr  Name to use on ID badge: Mike Garrison	Please enclose: • Two 2 x 2 passport-type
Phone: (304) 285-1142 Fax (304) 599	-8229 • Check for registration fee:
Please use this address for all mailings and publication:	\$60.00 for 2 yr. 2005/2006 or
MAILING ADDRESS: Michael S. Garrison	\$30.00 if registering after 1/1/2006
990 Elmer Prince Drive, Suite 205	Detailed instructions on back
Morgantown WV 2650	5 If questions, call (304) 558-0664
(city) (state)	(zip) email: <u>lsuchy@wvadmin.gov</u>
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Business address 990 Elmer Prince Drive, Suite 205	<b>3</b> T
607	Opekiska Road
P U D() 44/4	mont, WV 26554
Morgantown, vv Zooon san	e: (304 ) 366-0591 N
Phone: (304) 285-1142	(one employer per form) association that the LOBBYIST represents: Phone: (804 ) 423-6432
Name and complete address of the employer, organization of Boys & Girls Clubs of America, Inc.     13146 Midlothian Turnpike No. 147     Midlothian, VA 23113-4200  2. What topics or subjects will the lobbyist address on behalf of General Government Relations	Fax: (804) 423-6600  Type of business or occupation of Employer:
3. Check one or both: Legislative Lobbying	ministrative Lobbying
	npaid volunteer Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation contingen  ☐ Yes  ✓ No  ☐ No	t upon the success of the lobbying activity? t applicable
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Employer Notice on the outer size of this joint.	Date: 2-2\$-65
Authorized signature:	Title: SP DIrector
Type or print name: Charles Brady U	THE JET STITE CONTENTS



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• •Lobbyist In		please pri	nt or type) : mgarrison@spi	imaniaw	com	<<< IMPORTANT >>>
Name: Michael S. Ga Name to use on ID bad		E-maii	Tilgarison@spi	iii iidi iidaa.	001.1	Please enclose: • Two 2 x 2 passport-type photos
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Michael S. Ga						1/1/2006
Morgantown	nce Drive, Suite 205	WV	26505			Detailed instructions on back If questions, call (304) 558-0664
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Business addre	SS	e:	Resi	dential a	ddress	(not published)
990 Elmer Prince Dri	ve, Suite 203		682 Opekisk	a Road		
Morgantown, WV 26	3504-4474		Fairmont, W			
Phone: ( 304 )			Phone: (304	)	366	-0591
What topics or sub- General Government	viects will the lobbyist and Relations	address on be	ehalf of the above	Employe	r / Org	anization?
3. Check one or both:	Legislative Lobbyin	ng	Administrativ	ve Lobbyi	ing	
4. Check only one:	Retained solely as l		Unpaid volu	unteer	Re p	tained to lobby in addition to erforming other services
5. If compensated, is	any portion of that com	pensation co No	ntingent upon the Not applicab	success o le	of the l	obbying activity ?
Lobbyist Communication  - Lobbyist Comm	and complete. Lundersta er understand that if Var	the best of rand that it is a modern convicted of	of such an act, I ca	an be fined	d, sent	stained hereon and on any attached willfully and knowingly file a false or enced to jail, or both. I have read the
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authorization remains in	med above is authorized effect through year 2000	a to lobby on 6 unless term	ninated in writing b	efore that	ume.	I subjects listed on this form. This I have read and understand the
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Type or print name: M: C	hael C. Sella	RNS		Ti	tle: <u> </u>	ESIENTANI (EO

# WV Lobbyist Registration & Employer Authorization 2005-2006wv Employer 2005-200

• •Lobbyist Info		olease print or t	ype) ison@spilmanlav	v.com	<<< IMPORTANT >>>
Name to use on ID badge					Please enclose: • Two 2 x 2 passport-type
		(004 ) 500	9220		photos
		(304)_599	-8229		Check for registration fee: \$60.00 for 2 yr. 2005/2006
Plea se use this address f				\	or III
Michael S. Garri	MAILING ADDI	KESS:			\$30.00 if registering after 1/1/2006
	e Drive, Suite 205				Detailed instructions on back
Morgantown		WV 2650	5		If questions, call (304) 558-0664
(city)	(5	state)	(zip)	J	email: <u>lsuchy@wvadmin.gov</u>
Legislative session ad Business address 990 Elmer Prince Drive		: <b>:</b>	Residential a	address	(not published)
P. O. Box 4474			Opekiska Road		
Morgantown, WV 2650	)4-4474		mont, WV 26554		
Phone: ( <u>304</u> ) 28	5-1142	Phone	e: (3 <u>04</u> ))	366-0	591
What topics or subject     General Government I	ets will the lobbyist ac				nization?
3. Check one or both:	Legislative Lobbyin	g 💽 Adı	ministrative Lobby	/ing	
4. Check only one:	- Retained solely as lo	obbyist 📑 U	npaid volunteer	Ret:	ained to lobby in addition to rforming other services
5. If compensated, is any	portion of that comp	ensation contingent	upon the success of applicable	of the lo	bbying activity ?
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LOUDING SIGNACUITE.					
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Type or print name: Robe >	i D. VY hith	ck	Ti	itle: V/	e projection as

2005 MAR 14 AM I

• Lobbyist Information: (please print or type) <<< IMPORTANT >>> E-mail: mgarrison@spilmanlaw.com Name: Michael S. Garrison Please enclose: Name to use on ID badge: Mike Garrison Two 2 x 2 passport-type photos Phone: (304) 285-1142 Fax (304) 599-8229 Check for registration fee: \$60.00 for 2 yr. 2005/2006 Please use this address for all mailings and publication: \$30.00 if registering after MAILING ADDRESS 1/1/2006 Michael S. Garrison 990 Elmer Prince Drive, Suite 205 Detailed instructions on back 26505 If questions, call (304) 558-0664 Morgantown email: Isuchy@wvadmin.gov (state) (city) Legislative session address and phone: Residential address (not published) Business address 990 Elmer Prince Drive, Suite 205 682 Opekiska Road P. O. Box 4474 Fairmont, WV 26554 Morgantown, WV 26504-4474 366-0591 Phone: (304 )\_ Phone: (304) 285-1142 •Employer / Organization Information: (one employer per form) 1. Name and complete address of the employer, organization or association that the LOBBYIST represents: Phone: (<u>304</u>) <u>526-2052</u> Cabell Huntington Hospital 1340 Hal Greer Boulevard \*Type of business or occupation of Employer: Huntington, WV 25701 2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization? General Government Relations Administrative Lobbying 3. Check one or both: Legislative Lobbying Retained to lobby in addition to Unpaid volunteer Retained solely as lobbyist Check only one: performing other services 5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity? Not applicable • •Lobbyist Certification: To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code 6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if I am convicted of such an act, I can be fined, sentenced to jail, or both. I have read the information on the back of this form. Lobbyist Signature: 



#### West Virginia Lobbyist Statement of Representation

Return his completed form and all attachments to:
WV Ethics Commission
210 Brooks St., Suite 300
Cha rieston WV 25301

2005-2006

Important Filing Requirements for the Lobbyist

A fee of \$100.00 and this completed Statement of Representation (form-\$QR4) for each entity that you represent the appropriate is required in addition to the initial \$100.00 base registration fee.

If this is an initial registration a completed Lobbyist Registration (LRS-1) must accompany this form

If this Statement of Representation is filed as an additional representation, an Amended Registration Form (ARS) must accompany this form.

i. Lubbyist iia	ime as listed on Lob	byist Registration	rorm (fo	m LRS-1)
Name: Mike G	Sarrison	Registration	number (if knov	vn)
Email: mgarrisc	on@spilmanlaw.com	Phone : 304–285–	- <u>1142                                   </u>	304-599-8229 ax:
2. Represented NOTE: This R	d Employer, Organiz Representation Statement is valid to	zation or Associat through 2006 unless cancelled	ion inform d or changed befo	ation ore that time.
Centra E	Employer, Organization or Asso Bank,Inc			
Mailing address:	990 Elmer Prince I Morgantown, WV 20	Orive 6505	phone:	
Occupation or type	of business: bank			
	l Government Relation			
3. Lobbyist Inf				
Check only one:	Retained solely a Unpaid volunteer		not limited to la	bbying
Is the lobbyist emplo	— Unpaid volunteer  X Regular employer  Dyed or retained under any agr  s contingent upon the success	e, services include but are reement, arrangement or u s of his or her lobbying activ	nderstanding by vity?	which any compensation
Is the lobbyist emplo	Dipaid volunteer  Regular employer  byed or retained under any agr is contingent upon the success  NoNot	e, services include but are reement, arrangement or u s of his or her lobbying activ	nderstanding by vity?	which any compensation
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## West Virginia Lobbyist Statement of

Return this completed form and all attachments to: **WV Ethics Commission** 210 Brooks St., Suite 300 Charleston WV 25301

2005-2006

#### Important Filing Requirements for the Lobbyist

A fee of \$100.00 and this completed Statement of Representation AM 9: 32 Representation (form-SOR1) for each entity that you represent as a lobbyist is required in addition to the initial \$100.00 base

If this is an initial registration a completed Lobbyist Registration (LRS-1) must accompany this form

If this Statement of Representation is filed as an additional representation, an Amended Registration Form (ARS) must accompany this form.

Name: Mike	Garrison	Registra	ation number	(if known)_	
mgarris	on@spilmanlaw.com	Phone :	285–1142	Fax: _	304-599-8229
Represented NOTE: This R	d Employer, Organiza Representation Statement is valid th	ation or Assoc crough 2006 unless can	ciation in	formation ged before the	<b>on</b> nat time.
Complete name of E W/U R	Employer, Organization or Assoc esearch Corporation	ciation represented:			
	Post Office Box 6216 Morgantown, WV 26506-		phone: fax:		
—— Occupation or type o	of business: research	corporation	<u> </u>		
				£ 1 1 1 1	offorts
Provide a general de	escription of the subjects, topics	or issues which will	be the focus	of lobbying	enorts
Provide a general d	escription of the subjects, topics  General Government R		be the focus		
Provide a general d					
	General Government R	elations			
. Lobbyist Inf	General Government R	elations slobbyist			
. Lobbyist Inf Check only one:	General Government R  Formation:  Retained solely as	elations  Hobbyist  Services include but  Beement, arrangement  of his or her lobbying	t are not limit t or understar	ed to lobbyi	ing
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2005 SEP 15 AM 9: 32

(304) 285-1142

e-mail: mgarrison@spilmanlaw.com

September 13, 2005

#### VIA UPS NEXT DAY DELIVERY

Ms. Lucy Suchy WV Ethics Commission 210 Brooks Street, Suite 300 Charleston, WV 25301

Dear Ms. Suchy:

Enclosed please find the following:

- (a) Executed WV Lobbyist Statements of Representation for WVU Research Corporation and Centra Bank, Inc., along with a check in the amount of \$200.00, representing the total fees necessary to register each entity.
- (b) Mr. Garrison's Lobbyist Activity Report 2005-4, which attachments, for filing in your office.

Thanks for your assistance in this matter.

Very truly yours,

Michael S. Garrison

M. Drum W

MSG/vsl:320515v3

Enclosures

	Laborat Domistration	5-2006 26 AM 11: 07
147131	PAYMENT AMOUNT 600.00  S. CONTISAN, CONTINUE TOTAL CHECK \$600.00	e)
09-15-05	INVOICE DESCRIPTION  WV ETHICS COMMISSION-Lobby Reg Fees for I-79 Development Council, Glenmark Holding. Inc., Morgantown Area Economic Partnership, Branch Bank & Trust & RMS Strategies (1.20307) & Bruceton Bank (7704.42)	Residential address (not published) lorseshoe Road antown, WV 26508  (304 ) 594–2811  (one employer per form) ssociation that the LOBBYIST represents: Phone: (304 ) 284–5003 Fax: (304 ) 284–5002  • *Type of business or occupation of Employee e above Employer / Organization?
SPILMAN THOMAS & BATTLEc	INVOICE DATE INVOICE NUMBER 09-15-05 ck#147131	inistrative Lobbying  paid volunteer  PRetained to lobby in addition to performing other services  upon the success of the lobbying activity?  upplicable  dge, the information contained hereon and on any attached of WV Code 6B-3-9 to willfully and knowingly file a false or act, I can be fined, sentenced to jail, or both. I have read the Date: August 1, 2005

The lobbyist named above is authorized to lobby on our behalf in regard to the general subjects listed on this form. This authorization remains in effect through year 2006 unless terminated in writing before that time. I have read and understand the Employer Notice on the other side of this form.

Authorized signature:

Authorized signature:

Date:

August 1, 2005

Title:

Title:

Title:

• •Lobbyist Inf	ormation: Garrison	(please pri	int offypels 22 PM : :mgarrison@spilmar	2: 2 com << IMPORTANT >>>
Name: Included B.  Name to use on ID badg	Miles Co			Please enclose: • Two 2 x 2 passport-type photos
Phone: (304 ) _ 2		ax (304	) 599-8229	• Check for registration fee:
Please use this address				\$60.00 for 2 yr. 2005/2006
	MAILING A	DDRESS		\$30.00 if registering after
	. Garrison Prince Drive	C111+0 2	205	1/1/2006
	Prince Drive n, WV 26505	, Surue -		Detailed instructions on back If questions, call (304) 558-0664
(city)		(state)	(zip)	email: <u>Isuchy@wvadmin.gov</u>
Legislative session a	Advace and pho	·na•	4/11/11/11	
Business address	3			address (not published)
990 Elmer Pri	nce Drive, Su	ite 205	344 Horsesho Morgantown,	
Morgantown, W	V 26505			
Phone: ( 304 )	285-1142		Phone: ( 304 )	594-2811
<ul><li>Employer / O</li></ul>	rganization	. Informa	ation: (one emplo	oyer per form)
1. Name and complete T-79 Develor	e address of the emoment Council	ployer, organiz	zation or association that the Phone: (	e LOBBY151 represents.
	ly Circle		Fax: (	
Fairmont, W			• •Ty	pe of business or occupation of Employer:
2 What topics or subj	erts will the lobbyis	address on b	ehalf of the above Employer	er / Organization?
				1.7
General Gov	ernment Relat	TOILD		
3. Check one or both:	Legislative Lobby	ying	★ Administrative Lobbyi	
	Retained solely a		- ,	Retained to lobby in addition to performing other services
5. If compensated, is ar	ny portion of that comes Yes	mpensation co }No	ntingent upon the success o  X Not applicable	of the lobbying activity?
natoriale is tale, correct an	d complete. I unders understand that if I	etand that it is a	a violation of WV Code 6B-3	ion contained hereon and on any attached 3-9 to willfully and knowingly file a false or d, sentenced to jail, or both. I have read the
Lobbyist Signature:	MI			Date: August 1, 2005
3000 y at 0-5				
• •Employer A	uthorizatio	n (Origina	simulture required)	
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authorization remains in eff <b>Employer Notice</b> on the o	fect through year 20	06 unless term	inated in writing perore man	t time. I have read and understand the
Authorized signature:	1 3 60 6	ug hl	Da	ite: 1409 1 2005
7-5	Med Med	12 4 10 hol.	Ti'	tle: Sxecutive Director
, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6,				

• •Lobbyist Information: (please pr Name: Michael S. Garrison E-mai	int or type AUG 22 P I:mgarrison@spilman	14 2 29 <<< IMPORTANT>>>
Name to use on ID badge: Mike Garrison		Please enclose:  • Two 2 x 2 passport-type photos
Phone: ( 304 ) 285-1142 Fax ( 304	) 599-8229	• Check for registration fee:
Please use this address for all mailings and publicat		\$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after
Mailing Address: Michael S. Garrison	AMILIA AM	\$30.00 if registering arter 1/1/2006
990 Elmer Prince Drive, Suite Morgantown, W 26505	205	Detailed instructions on back If questions, call (304) 558-0664
(city) (state)	(zip)	email: <u>Isuchy@wvadmin.gov</u>
Legislative session address and phone:  Business address  Series 205	Residential a 344 Horses	ddress (not published)
990 Elmer Prince Drive, Suite 205 Morgantown, WV 26505	Morgantown	
	Phone: ( 304 )	594-2811
Phone: ( 304 ) 285-1142	Prone: ( 304 /	
1. Name and complete address of the employer, organic Glenmark Holding, LLC 1445 Stewartstown Road Morgantown, WV 26505	Fax:	pe of business or occupation of Employer:
What topics or subjects will the lobbyist address on b     General Government Relations	pehalf of the above Employe	
What topics or subjects will the lobbyist address on be	pehalf of the above Employe	ing
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• •Lobbyist In	nformation: (please	print or type) nail: mgarrison@spilmanl	Law com <<< IMPORTANT >>>
Name: MICHAEL 5  Name to use on ID bac	lge: Mike Garrison	iaii: Ingut 1100000-71	Please enclose: • Two 2 x 2 passport-type photos
Phone: ( 304 )_	285-1142 Fax ( 304	) 599-8229	• Check for registration fee:
	ss for all mailings and public		\$60.00 for 2 yr. 2005/2006 or
	MAILING ADDRESS		\$30.00 if registering after 1/1/2006
990 Elme	r Prince Drive, Suite wn, WV 26505	205	Detailed instructions on back If questions, call (304) 558-0664
(city)	(state)	(zip)	email: <u>lsuchy@wvadmin.gov</u>
Business addre 990 Elmer Pr	address and phone: ess ince Drive, Suite 205 WV 26505	344 Horseshoe	dress (not published) Road W 26508
			- Laboratoria de la companyo de la c
Phone: ( <u>304</u> )	285–1142	Phone: ( 304 ) 59	<u> </u>
2. What topics or sul	bjects will the lobbyist address of	n behalf of the above Employer /	1/1/4
Generat	GOVERNMENT METACTOR		
3. Check one or both	: X Legislative Lobbying	Administrative Lobbying	
4. Check only one:		<u> </u>	Retained to lobby in addition to performing other services
5. If compensated, is	any portion of that compensation ☐Yes ☐No	n contingent upon the success of to X Not applicable	the lobbying activity ?
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- Fmplover	Authorization (Orig	inal signature required)	
			neral subjects listed on this form. This me. I have read and understand the
Employer Notice on the	other side of this form.		8/1/15
Authorized signature:	Scott Rotrok	DateTitle	
Type or print name:	· DOUT HOTELOW	1100	- ACOULOG COOKER ALORALI

• •Lobbyist Information: (please p Name Michael S. Garrison E-ma	ail:mgarrison@spilmanlaw.com
Nameto use on ID badge: Mike Garrison	Please enclose:  • Two 2 x 2 passport-type photos
Phone: ( 304 ) 285-1142 Fax ( 304	○ 599-8229 • Check for registration fee:
Please use this address for all mailings and publica	\$60.00 for 2 yr. 2005/2006 or
Michael S. Garrison	\$30.00 if registering after 1/1/2006
990 Elmer Prince Drive, Suite	205  Detailed instructions on back
Morgantown, WV 26505	lf questions, call (304) 558-0664 (zip) email: lsuchy@wvadmin.gov
(city) (state)	(Др)
Legislative session address and phone:	Residential address (not published)
Business address 990 Elmer Prince Drive, Suite 205	344 Horseshoe Road
Morgantown, WV 26505	Morgantown, WV 26508
Phone: ( 304 ) 285-1142	Phone: ( 304 ) 594–2811
PROTE. ( 304 ) 205-1142	1.100
496 High Street  Morgantown, WV 26505  2. What topics or subjects will the lobbyist address on  General Government Relations	4
GENELAL GOVERNMENT 10220	
3. Check one or both: \ Legislative Lobbying	X-Administrative Lobbying
4. Check only one: Retained solely as lobbyist	Unpaid volunteer  Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation Yes No	contingent upon the success of the lobbying activity?    Not applicable
meterials is true, correct and complete. Lunderstand that it i	of my knowledge, the information contained hereon and on any attached is a violation of WV Code 6B-3-9 to willfully and knowingly file a false or d of such an act, I can be fined, sentenced to jail, or both. I have read the
Lobbyist Signature:	Date: August 1, 2005
2000) 0.1 - 18	
- Fmplover Authorization (Origin	nal signature required)
The lobbyist named above is authorized to lobby of authorization remains in left but furguesh year 2006 unless terminated by the street by the	on our behalf in regard to the general subjects listed on this form. This rminated in writing before that time. I have read and understand the
Authorized signature:	Date: August 1, 2005  Title: Senior Vice President
Type or print name: Patrick J. Martin	Title: Senior Vice President
Type or prine name.	

# WV Lobbyist Registration & Complete form, print and mail to WVEC Employer Authorization 2005–2006

	2005 AUG 0.0
- Lobbyist Information: (please p	print or type) AUG 22 PM 2-29 (IMPORTANT >>>
Name: Michael S. Garrison E-ma	ail:mgarrison@spilmanlaw com Please enclose:
Name to use on ID badge: Mike Garrison	• Two 2 x 2 passport-type photos
Phone: (304)285-1142Fax (304_	)
Plea se use this address for all mailings and publica	\$60.00 for 2 yr. 2005/2006 or
MAILING ADDRESS:	\$30.00 if registering after
Michael S. Garrison	705
990 Elmer Prince Drive, Suite Morgantown, W 26505	Detailed instructions on back If questions, call (304) 558-0664
(city) (state)	(zip)   email:  suchy@wvadmin.gov
(City)	
Legislative session address and phone:	n it wisheddesse (not published)
Business address	Residential address (not published) 344 Horseshoe Road
990 Elmer Prince Drive, Suite 205	Morgantown, WV 26508
Morgantown, WV 26505	Fiologantown, W Zooo
Phone: ( 304 ) 285-1142	Phone: ( 304 ) 594–2811
11010.	
Bruceton Mills, WV 26525  2. What topics or subjects will the lobbyist address on	
General Government Relations	
3. Check one or both: Legislative Lobbying	× PAdministrative Lobbying
4. Check only one: Retained solely as lobbyist	Unpaid volunteer Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation  Yes No	contingent upon the success of the lobbying activity?  Not applicable
	of my knowledge, the information contained hereon and on any attached is a violation of WV Code 6B-3-9 to willfully and knowingly file a false or ed of such an act, I can be fined, sentenced to jail, or both. I have read the
	Date: August 1, 2005
Lobbyist Signature:	Duv.
- Employer Authorization (Original Control	inal signature required)
	on our behalf in regard to the general subjects listed of the erminated in writing before that time. I have read and understand the
Authorized signature:	August 1, 2005  Date:
10	Tid: President
Type or print name: Brian F. Thomas	

ATTORNEYS AT LAW

e-mail: mgarrison@spilmanlaw.com

August 18, 2005

WV FIRE 22 PH 2:

WV Ethics Commission 1207 Quarrier Street, 4<sup>th</sup> Floor Charleston, WV 25301

Re: Lobbyist Registration and Employer Authorization Forms

Dear Sir or Madam:

Enclosed please find originals and one copy each of executed West Virginia Lobbyist Registration & Employer Authorization forms for 2005-2006 submitted on behalf of the following entities: I-79 Development Council; Glenmark Holding, LLC; Morgantown Area Economic Partnership; Branch Banking & Trust; and Bruceton Bank.

Please process these forms along with the others previously transmitted to your office.

Thank you for your attention to this matter.

Very truly yours,

Michael S. Garrison

MSG/vsl:293752v9 Enclosures ATTORNEYS AT LAW

2005 AUG 25 AH 11:07

(304) 285-1142

e-mail: mgarrison@spilmanlaw.com

August 24, 2005

WV Ethics Commission 1207 Quarrier Street, 4<sup>th</sup> Floor Charleston, WV 25301

Re: Lobbyist Registration and Employer Authorization Forms

Dear Sir or Madam:

Enclosed please find two originals of executed West Virginia Lobbyist Registration & Employer Authorization forms for 2005-2006 submitted on behalf of RMS Strategies.

Please process these forms along with the others previously transmitted to your

office.

Thank you for your attention to this matter.

Very truly yours,

Michael S. Garrison

MSG/vsl:293752v10 Enclosures

(304) 285-1142 e-mail: mgarrison@spilmanlaw.com

January 13, 2006

Ms. Lucy Suchy WV Ethics Commission 210 Brooks Street, Suite 300 Charleston, WV 25301

Re: Corotoman, Inc.

Dear Ms. Suchy:

Per your instructions, I am writing to advise you that I would like to terminate my registration as a lobbyist for the above named employer.

Thanks for your assistance in this matter.

Very truly yours,

Michael S. Garrison

MSG/vsl:320515v5



	bbyist Information: Michael S. Garrison	(please pr E-mail	int or type) I: mgarrison@spilmanlaw	.com	<<< IMPORTANT >>>
	use on ID badge: Mike Garriso	on			Please enclose: • Two 2 x 2 passport-type photos
Phone: ( 5	304 ) 285-1142	_Fax ( <u>304</u>	) 599-8229	I	Check for registration fee:
Please us	e this address for all mailing	s and publicat	ion:	ı	\$60.00 for 2 yr. 2005/2006
	MAILING	ADDRESS:			\$30.00 if registering after
	Michael S. Garrison				1/1/2006
	990 Elmer Prince Drive, Suite 2	205 WV	26505		Detailed instructions on back
	Morgantown	(state)	(zip)		If questions, call (304) 558-0664 email: lsuchy@wvadmin.gov
( i	(city)	(State)	(2-19)	′	
Legisla	itive session address and p	hone:		•	
Bı	usiness address		Residential a	ddress	(not published)
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P. O. B	ox 4474 ntown, WV 26504-4474		Fairmont, WV 26554		2 -==
	304 ) 285–1142			366-0	
THORE.	304 ) 205-11-12		//		<u> </u>
Cc 20 Ch	ne and complete address of the corotoman, Inc.  O Association Drive narleston, W 25311  It topics or subjects will the lobb		Fax:  • •Ty	(30 (30 pe of	business or occupation of Employer:
Co	ommercial development	and busine	ess issues		
3. Chec	ck one or both: Legislative Lo	bbying	Administrative Lobby	ing	
4. Chec	ck only one:	y as lobbyist	☐ Unpaid volunteer	<b>Z</b> •Re	stained to lobby in addition to erforming other services
5. If co	mpensated, is any portion of that	compensation co	ontingent upon the success of Not applicable	of the l	obbying activity?
materials is incomplete information	ar 💆 tarral assemble to tree	lamtand that it is:	a violation of WW Code 68	3-9 to v d, sent	tained hereon and on any attached villfully and knowingly file a false or enced to jail, or both. I have read the rate:
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T authorizati <i>Employer</i> Authorized	signature!	cion (Origina orized to lobby or 2006 unless terr	n our behalf in regard to the control of the contro	genera f time.	I subjects listed on this form. This I have read and understand the
Type or pri	int name: / U J (N/N		<b>у v (_)</b> Ti	itie:	TKC3KKK (C)

ATTORNEYS AT LAW

(304) 285-1142 e-mail: mgarrison@spilmanlaw.com

December 7, 2005

WV Ethics Commission 210 Brooks Street, Suite 300 Charleston, WV 25301

Re: WV Lobbyist Statement of Representation

Dear Sir or Madam:

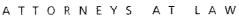
Enclosed please find an executed West Virginia Lobbyist Statement of Representation to add **Wheeling Island Kennel Owners Association**, **Inc.** to my file. Also enclosed is a check for \$100.00 to process this request.

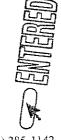
Thank you for your attention to this matter.

Very truly yours

Michael S. Garrison

MSG/vsl:293752v11 Enclosures





(304) 285-1142 e-mail: mgarrison@spilmanlaw.com

January 27, 2006

#### Via Facsimile (304) 558-2169

Ms. Lucy Suchy
WV Ethics Commission
210 Brooks Street, Suite 300
Charleston, WV 25301

WV ETHICS COMMISSION
2006 FEB ~2 PM I2: 13

Re: Wheeling Island Kennel Owners Association, Inc.

#### Dear Lucy:

I am writing to advise you that I am terminating my registration as a lobbyist for the above named Association.

Thank you for your assistance in this matter. Please feel free to contact me if you have any questions.

Very truly yours,

Michael S. Garrison

MSG/vsl:396934

cc: Lewis Brewer, Executive Director (Via Facsimile – 304.558.2169)

Theresa Kirk, General Counsel (Via Facsimile – 304.558.2169)

990 Elmer Prince Drive - Suite 205 - Post Office Box 4474 : Morgantown, West Virginia 26504-4474 www.spilmanlaw.com : 304.599.8175 - 304.599.8229 fax



# West Virginia Lobbyist Statement of Representation

Return this completed form and all attachments to:
WV Ethics Commission
210 Brooks St., Suite 300
Charleston WV 25301

Form SOR1 7/2005

2005-2006

add-on

Important i	Filing	Rec	uirements	for	the	Lobbyist
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A fee of \$100.00 and this completed Statement of Representation (form-SOR1) for each entity that you represent as a lobbyist is required in addition to the initial \$100.00 base registration fee.

If this is an initial registration a completed Lobbyist Registration (LRS-1) must accompany this form

If this Statement of Representation is filed as an additional representation, an Amended Registration Form (ARS) must accompany this form.

100 3

Name: Michae	l S. Garrison	Registrati	on number (i	f known)			
Email: mgarrisc	n0spilmanlaw.com	Phone : (304)	285-1142	Fax:	(304)	599-82	29
Represente	d Employer, Organi Representation Statement is valid	zation or Associ through 2006 unless cance	ation inf	ormat ed before	ion that time.		
Complete name of Wheeling	Employer, Organization or Ass TSland Kennel Owners	ociation represented: Association, Inc					
	3 Echo Terrace Wheeling, WV 26003		phone: _ fax:	(412) (412)	370-91 749-91	10* 82*	
来 Occupation or type	fax and phone number of business: Racing	2 are ror modern	- Larrenge A	Direct	or		
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Type or print name	11/105 R	ober whocken	Title 2	11/1/6/1	11 0K/11	<u> </u>	ML

ATTORNEYS AT LAW

(304) 285-1142 e-mail: mgarrison@spilmanlaw.com

January 27, 2006



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WV Ethics Commission
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Charleston, WV 25301

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990 Elmer Prince Drive : Suite 205 : Post Office Box 4474 : Morgantown, West Virginia 26504-4474 www.spilmanlaw.com : 304.599.8175 : 304.599.8229 fax LOUDY IST REGISTRATION INFORMATION OF THE PARTY OF THE PA

#### Lucy Suchy - Lobbyist Registration Information on File for MSG

From:

"Valerie S. Lopez" <vlopez@spilmanlaw.com>

To:

<lsuchy@wvadmin.gov>

Date:

12/07/2005 2:23 PM

Subject: Lobbyist Registration Information on File for MSG

Hi Lucy: I am Michael Garrison's assistant at Spilman Thomas & Battle PLLC. I am responding to your November 22, 2005 letter requesting any changes or corrections pertaining to the Employer Authorizations on file for Mr. Garrison. My only correction would be as follows: Change I-70 Development Council to I-79 Development Council. Thank you.

Valerie S. Lopez Spilman Thomas & Battle PLLC 990 Elmer Prince Drive, Suite 205 Morgantown, WV 26505 304-285-1170 (direct dial) 304-599-1845 (fax) vlopez@spilmanlaw.com

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