



# West Virginia Lobbyist Statement of Representation

## 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.

Rep # 1054  
100

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

**2005-2006**

### 1. Lobbyist name as listed on Lobbyist Registration Form (form LRS-1)

Name: Michael S. Garrison Registration number (if known) \_\_\_\_\_  
 Email: mgarrison@spilmanlaw.com Phone: (304) 581-6979 Fax: (304) 599-4260

RECEIVED  
WV ETHICS COMMISSION  
2006 MAR -2 AM 11:24

### 2. Represented Employer, Organization or Association information

NOTE: This Representation Statement is valid through 2006 unless cancelled or changed before that time.

Complete name of Employer, Organization or Association represented:  
ImageTree Corporation

Mailing address: The United Center, 3rd Floor, Suite 390  
1085 VanVoorhis Road phone: (304) 599-4260  
Morgantown, West Virginia 26507 fax: (304) 599-4272

Occupation or type of business: Timber Industry

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 lobbyist  
 Unpaid volunteer  
 Regular employee, services include but are not limited to lobbying

Is the lobbyist employed or retained under any agreement, arrangement or understanding by which any compensation paid to the lobbyist is contingent upon the success of his or her lobbying activity?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable

### 4. Employer certification:

I certify that the lobbyist named above is authorized to lobby on our behalf, and that to the best of my knowledge, this Statement of Representation is true, correct and complete. I have read the additional information on page 2 of this form.

Authorized Signature: [Signature] Date: 2-21-06  
 Type or print name; Mark Redlus Title: CEO



SPILMAN THOMAS & BATTLE, PLLC

ATTORNEYS AT LAW

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

February 27, 2006

RECEIVED  
WV ETHICS COMMISSION  
2006 MAR -2 AM 11:24

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 **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

## Important Filing Requirements for the Lobbyist

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FILE 1063  
021  
PPH

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

2005-2006

### 1. Lobbyist name as listed on Lobbyist Registration Form (form LRS-1)

Name: Michael S. Garrison Registration number (if known) \_\_\_\_\_  
Email: mgarrison@spilmanlaw.com Phone: (304) 581-6979 Fax: (304) 599-1845

RECEIVED  
WV ETHICS COMMISSION  
2006 MAR 27 AM 11:01

### 2. Represented Employer, Organization or Association information

NOTE: This Representation Statement is valid through 2006 unless cancelled or changed before that time.

Complete name of Employer, Organization or Association represented:  
Metro Rentals, LLC  
Mailing address: 325 Willey Street  
Morgantown, WV 26505 phone: (304) 292-0900  
fax: \_\_\_\_\_  
Occupation or type of business: Real Estate 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 lobbyist  
 Unpaid volunteer  
 Regular employee, services include but are not limited to lobbying

Is the lobbyist employed or retained under any agreement, arrangement or understanding by which any compensation paid to the lobbyist is contingent upon the success of his or her lobbying activity?  
Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable

### 4. Employer certification:

I certify that the lobbyist named above is authorized to lobby on our behalf, and that to the best of my knowledge, this Statement of Representation is true, correct and complete. I have read the additional information on page 2 of this form.

Authorized Signature: [Signature] Date: 3-23-06

Type or print name; RICHARD A. BIATORI Title: MANAGER



SPILMAN THOMAS & BATTLE, PLLC

ATTORNEYS AT LAW

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

March 23, 2006

RECEIVED  
WV ETHICS COMMISSION  
2006 MAR 27 AM 11:01

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 **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

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

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RECEIVED

2501  
#

## 1. Lobbyist name as listed on Lobbyist Registration Form (form LRS-1)

Name: Michael S. Garrison Registration number (if known) \_\_\_\_\_  
 Email: mgarrison@spilmanlaw.com Phone: (304) 581-6979 Fax: (304) 599-1800

RECEIVED  
WV ETHICS COMMISSION  
2006 FEB 21 PM 12:11

## 2. Represented Employer, Organization or Association information

NOTE: This Representation Statement is valid through 2006 unless cancelled or changed before that time.

Complete name of Employer, Organization or Association represented:  
Ohio Valley Health Services and Education Corporation

Mailing address: 2000 Eoff Street  
Wheeling, WV 26003 phone: (304) 234-8291  
 fax: (304) 234-8057

Occupation or type of business: medical center

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 lobbyist  
 Unpaid volunteer  
 Regular employee, services include but are not limited to lobbying

Is the lobbyist employed or retained under any agreement, arrangement or understanding by which any compensation paid to the lobbyist is contingent upon the success of his or her lobbying activity?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable

## 4. Employer certification:

I certify that the lobbyist named above is authorized to lobby on our behalf, and that to the best of my knowledge, this Statement of Representation is true, correct and complete. I have read the additional information on page 2 of this form.

Authorized Signature: [Signature] Date: 2/15/06  
 Type or print name: James R. Stultz Title: Senior Vice President  
Human Resources

# WV Lobbyist Registration & Employer Authorization 2005-2006

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back. If questions, call (304) 558-0000  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

RECEIVED  
 2005 MAR 11 AM 11:30

**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

Residential address (not published)  
344 Horseshoe Road  
Morgantown, WV 26508  
 Phone: ( 304 ) 594-2811

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Unisys Corporation Phone: ( 215 ) 986-6656  
Unisys Way Fax: ( 215 ) 986.0526  
Blue Bell, Pennsylvania 19424-0001

• Type of business or occupation of Employer:  
 \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: \_\_\_\_\_

Date: 4/11/05

**• 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. 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: David H. Pingree

Date: 5-3-05

Type or print name: David H. Pingree

Title: VP, Government Relations

# WV Lobbyist Registration & Employer Authorization 2005-2006

RECEIVED  
WV ETHICS COMMISSION  
2005 APR -8 AM 11:22

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
 (city) (state) (zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)  
344 Horseshoe Road  
Morgantown, WV 26508  
 Phone: ( 304 ) 594-2811

**• Employer / Organization Information:** (one employer per form)


1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Vandalia Heritage Foundation Phone: ( ) \_\_\_\_\_  
701 Benoni Avenue Fax: ( ) \_\_\_\_\_  
Fairmont, WV 26554

• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
General Government Relations

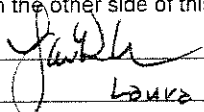
3. Check one or both:  Legislative Lobbying  Administrative Lobbying
4. Check only one:  Retained solely as lobbyist  Unpaid volunteer  Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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:  Date: 3/30/05

**• 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. 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:  Date: 4/4/05  
 Type or print name: Laura K. Kuhns Title: Executive Director

# WV Lobbyist Registration & Employer Authorization 2005-2006

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

**Residential address (not published)**  
344 Horseshoe Road  
Morgantown, WV 26508  
 Phone: ( 304 ) 594-2811

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
West Virginians for Infrastructure Phone: ( ) \_\_\_\_\_  
1618 Jacob Street Fax: ( ) \_\_\_\_\_  
Wheeling, West Virginia 26003


• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

General Government Relations

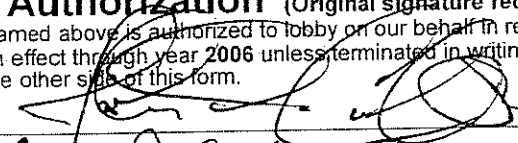
3. Check one or both:  Legislative Lobbying  Administrative Lobbying
4. Check only one:  Retained solely as lobbyist  Unpaid volunteer  Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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:  Date: 3/30/05

**• 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. 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:  Date: 4/3/05  
 Type or print name: John D. Culler Title: Exec. Dir.

2005 APR -6 PM 1:17  
 RECEIVED



# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: lsuchy@wvadmi.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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
Phone: ( 304 ) 366-0591

RECEIVED  
WV COMMISSION  
FEB 14 AM 8:54

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Alliance Resource Partners, L.P. Phone: ( 918 ) 295-7600  
1717 South Boulder Avenue Fax: ( ) \_\_\_\_\_  
Tulsa, OK 74119

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
Permitting and regulatory issues; energy concerns

65  
106

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [Signature] Date: 2/11/05

**• 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. 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: [Signature] Date: 1/10/05  
Type or print name: Daniel Thomas Title: VP-Government Affairs

# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:			
<u>Michael S. Garrison</u>			
<u>990 Elmer Prince Drive, Suite 205</u>			
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>	
(city)	(state)	(zip)	

**<<< IMPORTANT >>>**

Please enclose:

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Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

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P. O. Box 4474  
Morgantown, WV 26504-4474  
Phone: ( 304 ) 285-1142

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
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

• Type of business or occupation of Employer

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  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?  
 Yes  No  Not applicable

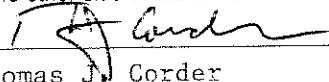
**• Lobbyist Certification:** To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code 6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if I am 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:  Date: \_\_\_\_\_

RECEIVED  
 WV ETHICS COMMISSION  
 2006 FEB - 9 AM 11:37  
 6317?

**• 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. 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:  Date: January 11, 2005  
Type or print name: Thomas J. Corder Title: President & CEO

# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

Name to use on ID badge: Mike Garrison

Phone: ( 304 ) 285-1142 Fax ( 304 ) 599-8229

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<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

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If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

RECEIVED  
 WV ETHICS COMMISSION  
 FEB-9 AM 11:37

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Information Manufacturing Corporation Phone: ( 304 ) 726-4809  
310 State Route 956 Fax: ( 304 ) 726-4768  
Rocket Center, WV 26726

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [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. 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: [Signature] Date: 1/17/05  
 Type or print name: Jim Cava Title: CFO

# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:

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<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

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- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

RECEIVED  
 WEST VIRGINIA COMMISSION  
 2005 FEB -9 AM 11:37

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
West Virginia Media Phone: ( 304 ) 720-6520  
13 Kanawha Boulevard, West Fax: ( 304 ) 345-7280  
Suite 300, P. O. Box 11848  
Charleston, WV 25339-1848

• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization? \_\_\_\_\_

1347

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [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. 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: [Signature] Date: 1/5/05  
 Type or print name: Bray Cary Title: President/CEO

# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
(city) (state) (zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)  
682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

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 WV ETHICS COMMISSION  
 2005 FEB - 9 AM 11:37

**Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Morgantown Area Chamber of Commerce Phone: ( 304 ) 292-3311  
1009 University Avenue, P. O. Box 658 Fax: ( 304 ) 296-6619  
Morgantown, WV 26507-0658

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

General Government Relations

134 ?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [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. 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: [Signature] Date: 12/28/04  
 Type or print name: F. Scott Rotruck Title: President

# WV Lobbyist Registration & Employer Authorization 2005-2006

50329

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
 (city) (state) (zip)

**<<< IMPORTANT >>>**

Please enclose:

• Two 2 x 2 passport-type photos

• Check for registration fee:  
 \$60.00 for 2 yr. 2005/2006  
 or  
 \$30.00 if registering after  
 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [jsuchv@wvadmin.gov](mailto:jsuchv@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

Residential address (not published)  
682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

RECEIVED  
 WV ETHICS COMMISSION  
 2005 FEB -9 AM 11:37

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:

Heather M. Bresch  
Mylan Laboratories, Inc.  
1500 Corporate Drive, Suite 400  
Canonsburg, PA 15317

Phone: ( 724 ) 514-1837  
 Fax: ( 724 ) 514-1873

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  Not applicable

134?

**• 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: [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. 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: [Signature] Date: 1/16/05

Type or print name: Heather BRESCH Title: \_\_\_\_\_

# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

**Please enclose:**

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

**Detailed instructions on back**  
**If questions, call (304) 558-0664**  
**email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

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 WV ETHICS COMMISSION  
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**Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:

Platinum Properties  
c/o Petroplus & Associates, Inc.  
P. O. Box 679  
Morgantown, WV 26507-0679

Phone: ( 304 ) 284-5000  
 Fax: ( 304 ) 284-5008

Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

Commercial Development

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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:  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. 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:  Date: 2/1/05

Type or print name: \_\_\_\_\_ Title: \_\_\_\_\_

# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-8664  
email: lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
Phone: ( 304 ) 366-0591

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WV ETHICS COMMISSION  
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**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Spilman Thomas & Battle, PLLC Phone: ( 304 ) 340-3800  
P. O. Box 273 Fax: ( 304 ) 340-3801  
Charleston, WV 25321

• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
General Government Relations 134?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  Not applicable

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Lobbyist Signature: [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. 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: [Signature] Date: 1/4/05  
Type or print name: Michael J. Basile Title: Managing Member



# WV Lobbyist Registration & Employer Authorization 2005-2006

50324

**• •Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

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 V ETHICS COMMISSION  
 005 FEB - 9 AM 11:37

**• •Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
West Virginia United Health System, Inc. Phone: ( 304 ) 368-2700  
1000 Technology Drive, Suite 2320 Fax: ( 304 ) 368-2719  
Fairmont, WV 26554

• \*Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

Healthcare, Business, Budgetary

9  
 3  
 149

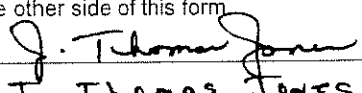
3. Check one or both:  Legislative Lobbying  Administrative Lobbying
4. Check only one:  Retained solely as lobbyist  Unpaid volunteer  Retained to lobby in addition to performing other services
5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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:  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. 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:  Date: 12/27/04  
 Type or print name: J. Thomas Jones Title: President / CEO

# WV Lobbyist Registration & Employer Authorization 2005-2006

*Caddon*

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
 (city) (state) (zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)  
682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

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**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
705-Five Development Group, LLC Phone: ( 304 ) 599-1232  
1325 Stewartstown Road Fax: ( ) \_\_\_\_\_  
Morgantown, WV 26505

• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization? 99?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  Not applicable

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Lobbyist Signature: *[Signature]* Date: 2/14/05

**• 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. 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: *[Signature]* Date: 2/10/05  
 Type or print name: Pat Alexander Title: Managing Member

# WV Lobbyist Registration & Employer Authorization 2005-2006

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
 (city) (state) (zip)

**<<< IMPORTANT >>>**

Please enclose:

• Two 2 x 2 passport-type photos

• Check for registration fee:  
 \$60.00 for 2 yr. 2005/2006  
 or  
 \$30.00 if registering after  
 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
 Phone: ( 304 ) 366-0591

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 2005 MAR -2 PM 4:34

**• Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:

Boys & Girls Clubs of America, Inc.  
13146 Midlothian Turnpike No. 147  
Midlothian, VA 23113-4200

Phone: ( 804 ) 423-6432  
 Fax: ( 804 ) 423-6600

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: *Michael S. Garrison*

Date: 2-15-05

**• 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. 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: *Charles Brady*

Date: 2-25-05

Type or print name: Charles Brady

Title: SR Director

# WV Lobbyist Registration & Employer Authorization 2005-2006

RECEIVED  
WV ETHICS COMMISSION

2005 MAR 14 AM 11:31

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
(city) (state) (zip)

<<< IMPORTANT >>>

Please enclose:

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Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
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:  
St. Mary's Medical Center Phone: ( 304 ) 526-1270  
2900 1st Avenue Fax: ( 304 ) 526-1538  
Huntington, WV 25702

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  Not applicable

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Lobbyist Signature: [Signature]

Date: 3/11/05

**• 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. 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: [Signature]

Date: 2-17-05

Type or print name: Michael C. Sellars

Title: President and CEO

# WV Lobbyist Registration & Employer Authorization 2005-2006

RECEIVED  
WV ETHICS COMMISSION  
2005 MAR 14 AM 11:31

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

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- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

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email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

**Legislative session address and phone:**

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P. O. Box 4474  
Morgantown, WV 26504-4474  
Phone: ( 304 ) 285-1142

Residential address (not published)  
682 Opekiska Road  
Fairmont, WV 26554  
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:  
CAMC  
P. O. Box 1547  
Charleston, WV 25326  
Phone: ( 304 ) 388-7627  
Fax: ( 304 ) 388-7696

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
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 portion of that compensation contingent upon the success of the lobbying activity?  
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Lobbyist Signature: [Signature] Date: 3/11/05

**• 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. 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: Robert D. Whitler Date: Mar 5, 2005  
Type or print name: Robert D. Whitler Title: Vice President for Government & Community Affairs

# WV Lobbyist Registration & Employer Authorization 2005-2006

RECEIVED  
WV-ET/REG/COMW  
2005 MAR 14 AM 1

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown WV 26505  
(city) (state) (zip)

<<< IMPORTANT >>>

Please enclose:

• Two 2 x 2 passport-type photos

• Check for registration fee:  
\$60.00 for 2 yr. 2005/2006  
or  
\$30.00 if registering after  
1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
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:

Cabell Huntington Hospital  
1340 Hal Greer Boulevard  
Huntington, WV 25701

Phone: ( 304 ) 526-2052  
Fax: ( 304 ) 526-2008

• Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [Signature]

Date: 3/11/05

**• 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. 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: [Signature]

Date: 2/18/05

Type or print name: BRENT A. MARSTELLER

Title: Pres & CEO



# West Virginia Lobbyist Statement of Representation

*Jul 2005 #5985*

**Important Filing Requirements for the Lobbyist**  
 WV ETHICS COMMISSION  
 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.

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

**2005-2006**

## 1. Lobbyist name as listed on Lobbyist Registration Form (form LRS-1)

Name: Mike Garrison Registration number (if known) \_\_\_\_\_  
 Email: mgarrison@spilmanlaw.com Phone: 304-285-1142 Fax: 304-599-8229

## 2. Represented Employer, Organization or Association information

NOTE: This Representation Statement is valid through 2006 unless cancelled or changed before that time.

Complete name of Employer, Organization or Association represented:  
Centra Bank, Inc.  
 Mailing address: 990 Elmer Prince Drive  
Morgantown, WV 26505 phone: \_\_\_\_\_  
 fax: \_\_\_\_\_  
 Occupation or type of business: bank  
 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 lobbyist  
 Unpaid volunteer  
 Regular employee, services include but are not limited to lobbying  
 Is the lobbyist employed or retained under any agreement, arrangement or understanding by which any compensation paid to the lobbyist is contingent upon the success of his or her lobbying activity?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable

## 4. Employer certification:

I certify that the lobbyist named above is authorized to lobby on our behalf, and that to the best of my knowledge, this Statement of Representation is true, correct and complete. I have read the additional information on page 2 of this form.  
 Authorized Signature: *John T. Fahey* Date: August 1, 2005  
 Type or print name: John T. Fahey Title: Vice President, Marketing



# West Virginia Lobbyist Statement of Representation

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.

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

WV ETHICS COMMISSION  
 2005 SEP 15 AM 9:32

48558

## 1. Lobbyist name as listed on Lobbyist Registration Form (form LRS-1)

Name: Mike Garrison Registration number (if known) \_\_\_\_\_  
 Email: mgarrison@spilmanlaw.com Phone: 304-285-1142 Fax: 304-599-8229

## 2. Represented Employer, Organization or Association information

NOTE: This Representation Statement is valid through 2006 unless cancelled or changed before that time.

Complete name of Employer, Organization or Association represented:  
WVU Research Corporation

Mailing address: Post Office Box 6216  
Morgantown, WV 26506-6216 phone: \_\_\_\_\_  
 fax: \_\_\_\_\_

Occupation or type of business: research corporation

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 lobbyist  
 Unpaid volunteer  
 Regular employee, services include but are not limited to lobbying

Is the lobbyist employed or retained under any agreement, arrangement or understanding by which any compensation paid to the lobbyist is contingent upon the success of his or her lobbying activity?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable

## 4. Employer certification:

I certify that the lobbyist named above is authorized to lobby on our behalf, and that to the best of my knowledge, this Statement of Representation is true, correct and complete. I have read the additional information on page 2 of this form.

Authorized Signature: F. Russell Lorince Date: August 1, 2005  
 Type or print name: F. Russell Lorince Title: Director of Economic Development





SPILMAN THOMAS & BATTLE, PLLC  
ATTORNEYS AT LAW

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

MSG/vsl:320515v3

Enclosures

En

5-2006  
26 AM 11:07

*Handwritten signature/initials*

*Michael S. Garrison, Lobbyist*

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Nan  
Pho: 147131  
Plea:  
  
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9  
M 09-15-05  
Ph  
  
Lot  
mat  
incc  
info:  
SPILMAN THOMAS & BATTLE, P.C.  
ATTORNEYS AT LAW

PAYMENT AMOUNT  
600.00

INVOICE DESCRIPTION

WV ETHICS COMMISSION-Lobby  
Reg Fees for 1-79 Development  
Council, Glenmark Holding,  
Inc., Morgantown Area  
Economic Partnership, Branch  
Bank & Trust & RMS Strategies  
(1-20307) & Bruceton Bank  
(7704.42)

INVOICE NUMBER

ck# 147131

INVOICE DATE

09-15-05

TOTAL CHECK \$600.00

TOTAL CHECK

e)  
in@spilmanlaw.com

229

(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos

100 Check for registration fee:  
~~\$60.00~~ for 2 yr. 2005/2006  
 or  
 \$30.00 if registering after  
 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

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 Employer:

e above Employer / Organization?  
*34*

ministrative Lobbying  
aid volunteer  Retained to lobby in addition to performing other services

upon the success of the lobbying activity?  
applicable

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

**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. 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: *Alyssa Goodish Gregg* Date: August 1, 2005  
Type or print name: *Alyssa Goodish Gregg* Title: *Senior VP Communicat*

# WV Lobbyist Registration & Employer Authorization 2005-2006

2005 AUG 22 PM 2: 2  
 com << IMPORTANT >>  
 Please enclose:  
 • Two 2 x 2 passport-type photos  
 • Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006  
 Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: lsuchy@wvadmin.gov

**• Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
 (city) (state) (zip)

**Legislative session address and phone:**

Business address  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505

Residential address (not published)  
344 Horseshoe Road  
Morgantown, WV 26508

Phone: ( 304 ) 285-1142

Phone: ( 304 ) 594-2811

**• Employer / Organization Information: (one employer per form)**

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:

I-79 Development Council  
1022 Kimberly Circle  
Fairmont, WV 26554

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

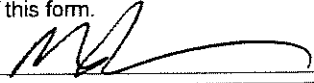
General Government Relations 134

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  Not applicable

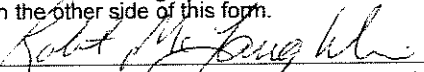
**• Lobbyist Certification:** To the best of my knowledge, the information contained hereon and on any attached materials is true, correct and complete. I understand that it is a violation of WV Code 6B-3-9 to willfully and knowingly file a false or incomplete report. I further understand that if I am 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: 

Date: August 1, 2005

**• 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. 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: 

Date: Aug 1, 2005

Type or print name: Robert McLaughlin

Title: Executive Director

# WV Lobbyist Registration & Employer Authorization 2005-2006

## • Lobbyist Information: (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:  
Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
(city) (state) (zip)

29 <<< IMPORTANT >>>

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

### Legislative session address and phone:

Business address  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
Phone: ( 304 ) 285-1142

Residential address (not published)  
344 Horseshoe Road  
Morgantown, WV 26508  
Phone: ( 304 ) 594-2811

## • Employer / Organization Information: (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Glenmark Holding, LLC Phone: ( )  
1445 Stewartstown Road Fax: ( )  
Morgantown, WV 26505

### • Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
General Government Relations 134

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [Signature] Date: August 1, 2005

## • 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. 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: [Signature] Date: August 1, 2005  
Type or print name: Mark Nesselroad Title: Member

# WV Lobbyist Registration & Employer Authorization 2005-2006

2005 AUG 22 PM 2:29

PA 47131

**Lobbyist Information:** (please print or type)  
Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:  
Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
(city) (state) (zip)

**<<< IMPORTANT >>>**  
Please enclose:  
• Two 2 x 2 passport-type photos  
• Check for registration fee:  
\$60.00 for 2 yr. 2005/2006  
or  
\$30.00 if registering after 1/1/2006  
Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

**Legislative session address and phone:**  
Business address: 990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
Phone: ( 304 ) 285-1142  
Residential address (not published): 344 Horseshoe Road  
Morgantown, WV 26508  
Phone: ( 304 ) 594-2811

**Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Morgantown Area Economic Partnership Phone: ( )  
Post Office Box 188 Fax: ( )  
Morgantown, WV 26507-0188

Type of business or occupation of Employer:  
\_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
General Government Relations

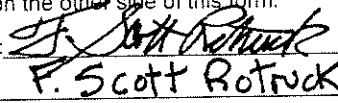
3. Check one or both:  Legislative Lobbying  Administrative Lobbying  
4. Check only one:  Retained solely as lobbyist  Unpaid volunteer  Retained to lobby in addition to performing other services  
5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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:  Date: August 1, 2005

**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. 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:  Date: 8/1/05  
Type or print name: F. Scott Rotruck Title: Executive Board, V. chair

# WV Lobbyist Registration & Employer Authorization 2005-2006

147131

**Lobbyist Information:** (please print or type) 2005 AUG 22

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
 (city) (state) (zip)

**IMPORTANT**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

**Legislative session address and phone:**

Business address  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505

Phone: ( 304 ) 285-1142

Residential address (not published)  
344 Horseshoe Road  
Morgantown, WV 26508

Phone: ( 304 ) 594-2811

**Employer / Organization Information: (one employer per form)**

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Branch Banking & Trust Phone: ( )  
496 High Street Fax: ( )  
Morgantown, WV 26505

Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
General Government Relations 134

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [Signature] Date: August 1, 2005

**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. 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: [Signature] Date: August 1, 2005  
 Type or print name: Patrick J. Martin Title: Senior Vice President

# WV Lobbyist Registration & Employer Authorization 2005-2006

Complete form, print and mail to WVEC

2005 AUG 22 PM 2:29

**Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com  
 Name to use on ID badge: Mike Garrison  
 Phone: ( 304 ) 285-1142 Fax ( 304 ) 599-8229

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
 If questions, call (304) 558-0664  
 email: [lsuchy@wvadmin.gov](mailto:lsuchy@wvadmin.gov)

Please use this address for all mailings and publication:

**MAILING ADDRESS:**

Michael S. Garrison  
990 Elmer Prince Drive, Suite 205  
Morgantown, WV 26505  
 (city) (state) (zip)

**Legislative session address and phone:**

Business address	Residential address (not published)
<u>990 Elmer Prince Drive, Suite 205</u> <u>Morgantown, WV 26505</u>	<u>344 Horseshoe Road</u> <u>Morgantown, WV 26508</u>
Phone: ( <u>304</u> ) <u>285-1142</u>	Phone: ( <u>304</u> ) <u>594-2811</u>

**Employer / Organization Information:** (one employer per form)

1. Name and complete address of the employer, organization or association that the LOBBYIST represents:  
Bruceton Bank Phone: ( ) \_\_\_\_\_  
Post Office Box 205 Fax: ( ) \_\_\_\_\_  
Bruceton Mills, WV 26525

• Type of business or occupation of Employer: \_\_\_\_\_

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?  
General Government Relations 134

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

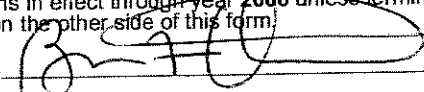
5. If compensated, is any portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  Not applicable

**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:  Date: August 1, 2005

**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. 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:  Date: August 1, 2005  
 Type or print name: Brian F. Thomas Title: President



SPILMAN THOMAS & BATTLE PLLC

ATTORNEYS AT LAW

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

August 18, 2005

RECEIVED  
WV ETHICS COM  
2005 AUG 22 PM 2:29

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 Bruceeton 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



(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



SPILMAN THOMAS & BATTLE, PLLC

ATTORNEYS AT LAW

(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

RECEIVED  
WV ETHICS COMMISSION  
2006 JAN 16 AM 10:00

MSG/vsl:320515v5

# WV Lobbyist Registration & Employer Authorization 2005-2006

58324

**Lobbyist Information:** (please print or type)

Name: Michael S. Garrison E-mail: mgarrison@spilmanlaw.com

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:		
<u>Michael S. Garrison</u>		
<u>990 Elmer Prince Drive, Suite 205</u>		
<u>Morgantown</u>	<u>WV</u>	<u>26505</u>
(city)	(state)	(zip)

**<<< IMPORTANT >>>**

Please enclose:

- Two 2 x 2 passport-type photos
- Check for registration fee: \$60.00 for 2 yr. 2005/2006 or \$30.00 if registering after 1/1/2006

Detailed instructions on back  
If questions, call (304) 558-0664  
email: [lsuchy@wvadmin.gov](mailto:lsuchy@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

Residential address (not published)

682 Opekiska Road  
Fairmont, WV 26554  
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:

Corotoman, Inc.  
200 Association Drive  
Charleston, WV 25311

Phone: ( 304 ) 346-2900  
Fax: ( 304 ) 346-3798

Type of business or occupation of Employer:

2. What topics or subjects will the lobbyist address on behalf of the above Employer / Organization?

Commercial development and business issues

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 portion of that compensation contingent upon the success of the lobbying activity?  
 Yes  No  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: [Signature] Date: \_\_\_\_\_

RECEIVED  
WV ETHICS COMMISSION  
2005 FEB - 9 AM 11:37

173

**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. 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: [Signature] Date: 1-4-04  
Type or print name: John Wellford Title: President



SPILMAN THOMAS & BATTLE, PLLC

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

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WV ETHICS COMMISSION  
2005 DEC - 8 PM 12:22



SPILMAN THOMAS & BATTLE, PLLC

ATTORNEYS AT LAW

ENTERED  
10

(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

RECEIVED  
WV ETHICS COMMISSION  
2006 FEB - 2 PM 12: 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)



# West Virginia Lobbyist Statement of Representation

2005-2006

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

### 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.

*add-on*

*100.00  
#5682*

## 1. Lobbyist name as listed on Lobbyist Registration Form (form LRS-1)

Name: Michael S. Garrison Registration number (if known) \_\_\_\_\_  
Email: mgarrison@spilmanlaw.com Phone: (304) 285-1142 Fax: (304) 599-8229

## 2. Represented Employer, Organization or Association information

NOTE: This Representation Statement is valid through 2006 unless cancelled or changed before that time.

Complete name of Employer, Organization or Association represented:  
Wheeling Island Kennel Owners Association, Inc.  
Mailing address: 3 Echo Terrace phone: (412) 370-9110\*  
Wheeling, WV 26003 fax: (412) 749-9182\*  
\*fax and phone numbers are for Robert Mackey-Director  
Occupation or type of business: Racing

Provide a general description of the subjects, topics or issues which will be the focus of lobbying efforts  
General Government Relations

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WV ETHICS COMMISSION  
2005 DEC -8 PM 12:22

## 3. Lobbyist Information:

Check only one:  Retained solely as lobbyist  
 Unpaid volunteer  
 Regular employee, services include but are not limited to lobbying

Is the lobbyist employed or retained under any agreement, arrangement or understanding by which any compensation paid to the lobbyist is contingent upon the success of his or her lobbying activity?  
Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable

## 4. Employer certification:

I certify that the lobbyist named above is authorized to lobby on our behalf, and that to the best of my knowledge, this Statement of Representation is true, correct and complete. I have read the additional information on page 2 of this form.

Authorized Signature: [Signature] Date: Robert Mackey  
Type or print name: 11/05 Robert Mackey Title: Director/member



SPILMAN THOMAS & BATTLE, PLLC

ATTORNEYS AT LAW

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

January 27, 2006

RECEIVED  
WV ETHICS COMMISSION  
2006 FEB 2 PM 12:13

Via Facsimile (304) 558-2169

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

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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)

Lobbyist Registration Information on File for MSG

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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

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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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