

Return to:  
WV Ethics Commission  
210 Brooks St., Ste 300  
Charleston, WV 25301  
(304) 558-0664  
ethics.wv.gov

## West Virginia Lobbyist Termination Notice

Final reporting period dates: 1/1/24 through 4/30/24  
(January 1 or date of last report) (Final lobbying date)

- ☐ I am completely terminating my full lobbyist registration and will no longer lobby in WV, or  
☒ I am terminating only the employer(s) listed in #2 below.

\*\*\*Note: You are still subject to audit – Keep your address up to date for the next two years.

### 1. Lobbyist Name (Please PRINT clearly or type. Indicate if address had changed.)

Print Name: M. GREGORY HEENER E-mail: gregheener@gmail.com Phone: (304) 677-5589  
Preferred mailing address: PO Box 1318, BRIDGEPORT, WV 26330

### 2. Represented Employer(s)/Organization(s)

1. FirstEnergy 4. \_\_\_\_\_  
2. \_\_\_\_\_ 5. \_\_\_\_\_  
3. \_\_\_\_\_ 6. \_\_\_\_\_

### 3. Lobbying Activity

Describe the subject matter of the lobbying activities in which you have engaged this year.

DISCUSSED LEGISLATION WITH MEMBERS OF WV LEGISLATURE AND OTHER STATE OFFICIALS REGARDING ISSUES ASSOCIATED WITH ENERGY, ECONOMIC DEVELOPMENT, BROADBAND, ATTACHMENTS AND OTHER MISCELLANEOUS TOPICS.

### 4. Expenditures: If no expenditures, check here ☐

If you spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following categories under the corresponding employer you represent. Complete and attach **Schedule A** to this notice. Report all expenditures made by you and/or your employer on government officials and employees in furtherance of your lobbying activities. Do not report your compensation as a lobbyist or expenditures you or your employer made for your personal meals, lodging, travel or office support expenses.

For more than one employer, show the amount under the appropriate employer column

	Emp 1	Emp 2	Emp 3	Emp 4	Emp 5	Emp 6	Total Expended
A Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B Lodging	\$	\$	\$	\$	\$	\$	\$
C Advertising	\$	\$	\$	\$	\$	\$	\$
D Travel	\$	\$	\$	\$	\$	\$	\$
E Gifts	\$	\$	\$	\$	\$	\$	\$
F Other Expenditures	\$	\$	\$	\$	\$	\$	\$
G Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H Campaign Contributions	List amount in "Total Expended" column.						\$ <u>500.00</u>
I Total of all expenditures	\$	\$	\$	\$	\$	\$	\$ <u>500.00</u>

If you sponsored or contributed to any group event or shared expenses, complete and attach a **Schedule B** for each event.

### 5. Lobbyist's Certification and Signature

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 W.Va. 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.

Lobbyist signature [Signature]

Date 4-30-24

## West Virginia Ethics Commission

## Lobbyist Activity Report Form

2024-2

West Virginia Ethics Commission

Attn: Lobbyist Registrar

210 Brooks St., Ste. 300

Charleston, WV 25301

304-558-0664

No faxed copies

For office use only:

Postmark \_\_\_\_\_

Rec'd \_\_\_\_\_

Days late \_\_\_\_\_

Fine \_\_\_\_\_

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

## 1. Name and contact information

Name Abby RealePhone 3044171114Address 7 Greenbrier streetEmail areale@firstenergycorp.comCity, State Zip Charleston, WV

## 2. Reporting period for which this activity report is being filed

Check	Report	Period	Due Date				
x	2024-2	5/1/24-8/31/24	9/16/2024				

## 3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

1. Marshall Health Network

4. \_\_\_\_\_

2. First Energy Corp

5. \_\_\_\_\_

3. \_\_\_\_\_

6. \_\_\_\_\_

## 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

None

## 5. Expenditures

If no expenditures, including campaign contributions, mark here: ☒

If you spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following categories per each employer you represent. Complete and attach Schedule A to this report.


Expenditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$0

If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and attach a Schedule B for each event.

Continued on page 2

Lobbyist Name	Abby Reale
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6. Total of all expenditures from line 5-I. (on page 1)	0
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7. Lobbyist certification – Please read and sign below.	
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 convicted of such an act, I may be fined, sentenced to jail or both.	
Lobbyist Signature: 	Date: 9/13/2024



## West Virginia Ethics Commission

## Lobbyist Activity Report Form

2024-3

West Virginia Ethics Commission

Attn: Lobbyist Registrar

210 Brooks St., Ste. 300

Charleston, WV 25301

304-558-0664

No faxed copies

For office use only:

Postmark \_\_\_\_\_

Rec'd \_\_\_\_\_

Days late \_\_\_\_\_

Fine \_\_\_\_\_

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

## 1. Name and contact information

Name Abby Reale

Address 7 Greenbrier Street

City, State Zip Charleston, WV 25311

Phone 3044171114

Email areale@firstenergycorp.com

## 2. Reporting period for which this activity report is being filed

Check	Report	Period	Due Date				
x	2024-3	9/1/24-12/31/24	1/15/2025				

## 3. List all employers/organizations that you represent as a lobbyist

Use additional reporting forms if necessary.

1. FirstEnergy - MonPower &amp; Potomac Edison

4. \_\_\_\_\_

2. \_\_\_\_\_

5. \_\_\_\_\_

3. \_\_\_\_\_

6. \_\_\_\_\_

## 4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."

Presentation December 10th - Interims

## 5. Expenditures

If no expenditures, including campaign contributions, mark here:



If you spent money on any public official, employee or member of his or her immediate family, list the amounts spent in each of the following categories per each employer you represent. Complete and attach Schedule A to this report.

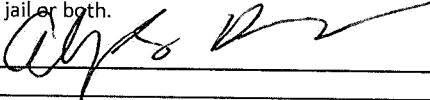
Expenditure Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$0

If you sponsored or contributed to any group event or shared expenses, list the total expended in category 5G immediately above. Complete and attach a Schedule B for each event.

Continued on page 2

Lobbyist Name	Abby Reale
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6. Total of all expenditures from line 5-I. (on page 1)	0
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7. Lobbyist certification – Please read and sign below.	
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 convicted of such an act, I may be fined, sentenced to jail or both.	
Lobbyist Signature: 	Date: 1/2/2025

FILE YOUR REPORT ONLINE BY VISITING OUR  
LOBBYIST PORTAL

REGISTERLOBBYIST.WV.GOV