

Virginia Conflict of Interest and Ethics Advisory Council LOBBYIST REGISTRATION FORM (Rev. 4/05)

FOR OFFICE USE ONLY
Principal Notification Date

Date Received _____ Fee Paid: Check # ____ Cash____

Please send the original and a copy with a \$50.00 registration fee, made Payable to the Treasurer of Virginia to:

Secretary of the Commonwealth Attn: Lobbyist Specialist 1111 E. Broad St 4th Floor Richmond, Virginia 23219

(1) PRINCIPAL:	Virginia Beverage Association
(1a) What type of business is	s the principle engaged in:
	Trade Association for Beverage Bottlers and Manufacturers.
Officer of Principal authorizin may not appear in items 2 and	ng your employment as a lobbyist, or to whom your expenditures will be reported. <i>The same name</i> 15 of this form.
(2) Name:	Ray Chapman
(2a) Business Address:	1913 W. State Street Bristol, VA 24201
(2b) Business Telephone:	276-791-9405
	retain ALL records, in behalf of the principal, with respect to your lobbying activities for their psically stored in another location, please so indicate in the space provided by item 3c.
(3) Name:	Ray Chapman
	1913 W. State Street Bristol, VA 24201
(3b) Business Telephone: _	276-791-9405
(3c) Business Address/Telep	hone number of location where records are stored:
	2307 E. Broad St. Richmond, VA 23223
	804-644-7884

(4) Please list the full name(s), business address(es), and telephone number(s) of all other individual(s) that are registered to lobby in behalf of the *PRINCIPAL* listed in item 1 of your registration form.

Charles R. Duvall, Jr., PO Box 170, Richmond, VA 23218 (804) 644-7884 Tripp Perrin, PO Box 170, Richmond, VA 23218 (804) 644-7884

SECRETARY OF THE COMMONWEALTH LOBBYIST'S REGISTRATION Page Two

(5) **LOBBYIST:** _____

(5a) Business Address:	4202 Hanover Ave. Richmond, VA 23221
(5b) Business Telephone:	8043375436
	mg@guthridgeassociates.com
ndividual who will retain ALL record	ds, on behalf of the lobbyist, with respect to your lobbying activities for the afore-designated red in another location, please so indicate in the space provided in item 7d.
6) Name:	Lucy Ackerly
6a) Business Address:	PO Box 170 Richmond VA 23218
6b) Business Telephone:	804-644-7884
6c) Business Address/Telephone nu	imber of location where records are stored:
	2307 E. Broad St. Richmond, VA 23223
	804-644-7884
and taxation.	
8) As a lobbyist, you are: (check or	ne)
Employed (Lobbyist is or	payroll of principal)
Retained (Lobbyist is not	on payroll of principal, but is compensated)
Not Compensated (Lobby	yist is not compensated, but expenses may be reimbursed)
9) If you are <i>employed</i> either part-	time or full-time by the principal, please give your job title:
	, do state that the information furnished on this registration statement and on any and ed thereto, is to the best of my knowledge and belief, complete and accurate.
Date: 05/03/2016	Lobbyist's Signature: JD Morgan Guthridge (Electronically Signed: 5/3/2016 3:51:01 PM UT
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JD Morgan Guthridge