



17ASS884E32

**Virginia Conflict of Interest and Ethics Advisory Council**  
**LOBBYIST REGISTRATION FORM (Rev. 4/26/2016)**

Please send the original and a copy with a \$100.00 registration fee, made  
Payable to the Treasurer of Virginia to:

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

**FOR OFFICE USE ONLY**  
**Principal Notification Date** \_\_\_\_\_  
**Date Received** \_\_\_\_\_  
**Fee Paid: Check #** \_\_\_\_\_ **Cash** \_\_\_\_\_

(1) **PRINCIPAL:** \_\_\_\_\_ American Heart Association

(1a) **What type of business is the principle engaged in:** \_\_\_\_\_  
Nonprofit

Officer of Principal authorizing your employment as a lobbyist, or to whom your expenditures will be reported. *The same name may not appear in items 2 and 5 of this form.*

(2) **Name:** \_\_\_\_\_ Ashley Gaiane Bell

(2a) **Business Address:** \_\_\_\_\_ 3131 RDU Center Drive, Suite 100 Morrisville, NC 27560

(2b) **Business Telephone:** \_\_\_\_\_ 9194638314

Officer of Principal who will retain **ALL** records, in behalf of the principal, with respect to your lobbying activities for their organization. If records are physically stored in another location, please so indicate in the space provided by item 3c.

(3) **Name:** \_\_\_\_\_ Ashley Gaiane Bell

(3a) **Business Address:** \_\_\_\_\_ 3131 RDU Center Drive, Suite 100 Morrisville, NC 27560

(3b) **Business Telephone:** \_\_\_\_\_ 9194638314

(3c) **Business Address/Telephone number of location where records are stored:**

\_\_\_\_\_  
\_\_\_\_\_

(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.**

Robin Gahan 4217 Park Place Court Glen Allen VA 23060 804-965-6521  
Aimee Perron Seibert 118 N. 8th St. 1st Floor Richmond, VA 23219 804-647-3140  
Lauren Schmitt 118 N. 8th St. Richmond, VA 23219 804-484-4751

SECRETARY OF THE COMMONWEALTH  
LOBBYIST'S REGISTRATION  
Page Two

(5) **LOBBYIST:** Melissa Assalone  
(5a) **Business Address:** 4217 Park Place Court Glen Allen, VA 23060  
(5b) **Business Telephone:** 804-965-6575  
(5c) **E-Mail Address:** melissa.assalone@heart.org

Individual who will retain ALL records, on behalf of the lobbyist, with respect to your lobbying activities for the afore-designated principal. If records are physically stored in another location, please so indicate in the space provided in item 7d.

(6) **Name:** Melissa Assalone  
(6a) **Business Address:** 4217 Park Place Court Glen Allen, VA 23060  
(6b) **Business Telephone:** 804-965-6575  
(6c) **Business Address/Telephone number of location where records are stored:**

(7) **Matters and purpose for which you expect to lobby:** (be as specific as possible in this response)  
Improving the health of all Virginians: Medicaid; Tobacco and other tobacco product control, prevention, and cessation; systems of care; Nonprofit issues; other

(8) **As a lobbyist, you are:** (check one)

- ☒ **Employed** (Lobbyist is on payroll of principal)  
☐ **Retained** (Lobbyist is not on payroll of principal, but is compensated)  
☐ **Not Compensated** (Lobbyist is not compensated, but expenses may be reimbursed)

(9) **If you are *employed* either part-time or full-time by the principal, please give your job title:**

Director, Government Relations

**I, the undersigned lobbyist, do state that the information furnished on this registration statement and on any and all accompanying statements attached thereto, is to the best of my knowledge and belief, complete and accurate.**

Date: 05/18/2016 Lobbyist's Signature: Melissa Assalone (Electronically Signed: 5/18/2016 7:38:15 PM UTC)