

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

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

16SYK2E2968

FOR OFFICE USE ONLY Principal Notification Date ___ Date Received _ Fee Paid: Check # _____ _ Cash_

(1) PRINCIPAL:	Virginia Manufacturers Association
(1a) What type of business is the	e principle engaged in:
VMA develo	ps policies and activities on behalf of industry and offers business services
Officer of Principal authorizing y may not appear in items 2 and 5 d	our employment as a lobbyist, or to whom your expenditures will be reported. <i>The same name of this form</i> .
(2) Name:	Brett Vassey
(2a) Business Address:	2108 West Laburnum Avenue Suite 100F, Richmond, VA 23227
(2b) Business Telephone:	8047091322
	tain ALL records, in behalf of the principal, with respect to your lobbying activities for their cally stored in another location, please so indicate in the space provided by item 3c.
(3) Name:	Mac Smith
	2108 West Laburnum Avenue Suite 100F, Richmond, VA 23227
(3b) Business Telephone:	8047091321
(3c) Business Address/Telephon	ne 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

Katherine DeRosear 2108 W Laburnum Ave Ste 100F Richmond, VA 23227 kderosear@vamanufacturers.com 804-643-7489 x22

lobby in behalf of the PRINCIPAL listed in item 1 of your registration form.

Brett Vassey 2108 W Laburnum Ave STE 100F
Richmond, VA 23227
bvassey@vamanufacturers.com
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LOBBYIST'S REGISTRATION
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(5) LOBBYIST:	Sharon Sykes
(5a) Business Address:	2108 West Laburnum Avenue Suite 100F, Richmond, VA 23227
	8047091327
	ssykes@vamanufacturers.com
	ALL records, on behalf of the lobbyist, with respect to your lobbying activities for the afore-designated visically stored in another location, please so indicate in the space provided in item 7d.
(6) Name:	Sharon Sykes
(6a) Business Address:	
	8047091327
(6c) Business Address/Tel	ephone number of location where records are stored:
	or which you expect to lobby: (be as specific as possible in this response) mental, energy, workplace, business law, insurance, and technology issues
(8) As a lobbyist, you are:	(check one)
Employed (Lot	obyist is on payroll of principal)
Retained (Lobb	pyist is not on payroll of principal, but is compensated)
☐ Not Compensa	ted (Lobbyist is not compensated, but expenses may be reimbursed)
(9) If you are <i>employed</i> eit	her part-time or full-time by the principal, please give your job title:
	Director of Member Services
	d lobbyist, do state that the information furnished on this registration statement and on any and attached thereto, is to the best of my knowledge and belief, complete and accurate.
Date: 12/01/20	