**West Virginia Ethics Commission** 

## Lobbyist Activity Report Form Received

Lobbyist certification - Please read and sign below.

may be fined, sentenced to jail or both.

2018-01

MAY 1 0 2018

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

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 \_\_\_\_\_

Days late \_\_

Rec'd\_ Fine

1. Name and contact information									
Name Thomas Bailey					Phone 304-542-4698				
	Address 902 Jackson Road					Email tsbailey@kvc.org			
Address					Email_	Email			
City, State Zip Saint Albans									
2. Reporting period for which this activity report is being filed									
Check	Report Period	Due Date	Law Bill						
х	2018-1 1/1/18-4/30/18	5/15/2018							
			as of Size		7. T. A.				
			THE PERSON	1-12/11/20	-14-61				
3. L	3. List all employers/organizations that you represent as a lobbyist  Use additional reporting forms if necessary.								
KVC Hoolth Systems									
2	2. West Virginia Symphony Orchestra 5.								
3	3								
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
General advocacy for foster care & child welfare; advocacy for transitioning current DHHR programs supporting children									
and families ("Safe at Home WV") into implementation of new federal legislation; lobby to support legislation to reduce the size of									
WV DHHR; advocacy for state support for community-based WV Symphony activities; general advocacy to increase / preserve art resources									
*** Driving advocacy for state support for community-based *** Cymphony activities, general advocacy to increase / preserve art resources									
5. E	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.									
Expen	diture Categories	Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Contributions	+		PENDED" COLU				\$	
1.	TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$	
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									

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