

received 5-15-2024
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West Virginia Ethics Commission Lobbyist Activity Report Form 2024-1

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 Thomas S. Bailey Phone (304) 542-4698
 Address 716 Lee St NEt, Ste 201 Email tommy.bailey2@gmail.com
etc
 City, State Zip Charleston, WV 25301

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

Check	Report	Period	Due Date				
x	2024-1	1/1/24-4/30/24	5/15/2024				

3. List all employers/organizations that you represent as a lobbyist *Use additional reporting forms if necessary.*

1. The Underserved Children Fund, Inc. a. Lighthouse Community Investment Agency
 2. Med-Surg Physician Group, Inc. 5. _____
 3. Alpha Technologies, Inc. 6. _____

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

Advocated for greater broadband spending; legislative monitoring; advocated for greater investment in Medicaid substance use disorder services.

5. Expenditures

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

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	\$	\$	\$	\$	\$	\$	\$

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 | Thomas Bailey

6. Total of all expenditures from line 5-1. (on page 1)

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 §68-3-9 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: Thomas Bailey Date: 15 MAY 24