

# Lobbyist Activity Report Form

2024-01

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:

**RECEIVED**

By WV Ethics Commission at 8:43 am, May 10, 2024

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

**1. Name and contact information**

Name Thomas J. O'Neill Phone 304-288-3263  
 Address 4939 Teays Valley Road Email Thomas.ONeill@AlticeUSA.com  
 City, State Zip Scott Depot, WV 25560

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

| Check | Report | Period         | Due Date |  |  |  |  |
|-------|--------|----------------|----------|--|--|--|--|
| x     | 2024-1 | 1/1/24-4/32/24 | 5/15/24  |  |  |  |  |
|       |        |                |          |  |  |  |  |

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

1. CSC Holdings, LLC 4. \_\_\_\_\_  
 2. \_\_\_\_\_ 5. \_\_\_\_\_  
 3. \_\_\_\_\_ 6. \_\_\_\_\_

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

Engagement with legislative and executive branch personnel to promote broadband development

**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    | <b>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</b> |            |            |            |            |            | \$             |
| 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.