

West Virginia Ethics Commission

Lobbyist Activity Report Form

2024-01

West Virginia Ethics Commission
Attn: Lobbyist Registrar
210 Brooks St., Ste. 300
Charleston, WV 25301

RECEIVED

No faxed copies

By WV Ethics Commission at 1:22 pm, Apr 29, 2024

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

1. Name and contact information

Name BRAD STORY
Address 405 Capitol St
Suite 900
City, State Zip Charleston, WV 25301

Phone 304-343-0728
Email brad@wvbehavioralhealth.org

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.

- WV Behavioral Healthcare Providers Association
- _____
- _____
- _____
- _____
- _____

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

Behavioral Healthcare, Medicaid, Budget and matters of general to the association

5. 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.

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.						\$ <u>554.10</u>
I. TOTAL of all expenditures	\$	\$	\$	\$	\$	\$	\$ <u>554.10</u>

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.

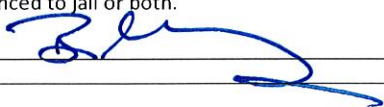
Continued on page 2

Lobbyist Name	<i>Beard Story</i>
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6. Total of all expenditures from line 5-I. (on page 1)	
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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 §6B-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:  Date: 4/27/24