

*Amended by  
Lee A. Bias*

**Financial Disclosure Statement Filing**

Filing Confirmation # 3802

**Step 1: Statement Information**

Report Year: 2015  
Date Filed: 1/19/2016  
Filing Type: Original  
Report Type: Financial Disclosure

*LB - 4-1-2016*

**Candidate  
Received**

**Delegate**

**APR - 1 2016**

**WV Ethics Commission**

**Candidate**

**Hand Delivered**

**Name of Filer and Spouse**

Filer First Name: Lee  
Filer Last Name: Bias  
Spouse First Name: Stacey  
Spouse Last Name: Bias  
County of Residence: Cabell

**Step 1: Business Address**

Name: Cabell Huntington Hospital  
Address 1: 1340 Hal Greer Boulevard  
Address 2:  
City: Huntington  
State: WV  
Zip Code: 25701

**Step 2: Candidate / Officeholder Information**

Do you currently hold a county circuit or state elected office?:

~~No~~ Yes.

Have you filed candidacy papers for

Yes

*Correction: I was appointed to an unexpired seat on the Cabell County Executive Committee. I was of the assumption that since I was not elected, that this did not count. I have been advised that although I was appointed, the seat itself is an elected position.*

*LB - 4-1-2016*

public office in the next  
election?:

For what office?: **WV House of Delegates**

Date you filed for  
candidacy?: **1/13/2016**

**Step 3: Appointed Positions**

No Positions to Report

**Step 4: Business Names**

No Business Names to Report

**Step 5: Employment**

Type	Employer Name	Address	Description
Self	Cabell Huntington Hospital	1340 Hal Greer Boulevard Huntington, WV 25510	Certified Regis...
Spouse	Cabell Huntington Hospital	1340 Hal Greer Boulevard Huntington, WV 25510	Registered Nurs...

**Step 6: 20% Gross Income Categories**

Neither my spouse nor I received more than 20% of our gross income during the past 12 months

**Step 7: All Sources of Income over \$1,000, including Employment**

Type	Category / Source	Description
Self	Employment	Certified Registered Nurse Anesthetist (CRNA)
Spouse	Employment	Registered Nurse (RN)

**Step 8: Business Interests and Commercial Real Estate**

Neither my spouse nor I had any business interests meeting these criteria

**Step 9: For-Profit Business or Organization**

Neither my spouse nor I serve on a Board of Directors or is an Officer

**Step 10: Non-Profit Organizations**

Neither my spouse nor I serve on a Board of Directors or is an Officer

**Step 11: Sales or Contracts with Governmental Entities**

Neither my spouse nor I had contract for the sale of any goods or services to a state, county, municipal or other local governmental agency, either directly or through a partnership, corporation or association in which either you or your spouse owned or controlled more than (10%) ten percent during the past calendar year

**Step 12: Adult Children - Public Employment**

I have no adult children or step children employed by state, county, or municipal government

**Step 13: Debts Owed to Others**

Name
Chase Bank
Toyota Financial Services

**Step 14: Debts Owed to You**

I have no reportable debts

**Step 15: Gifts**

I have no received reportable gifts