West Virginia Ethics Commission

Name and contact information

Lobbyist Activity Report Form

2023-03

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

RECEIVED

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

By WV Ethics Commission at 10:03 am, Jan 16, 2024

Name Gree Thomas					Phone 304-650-0779				
Name	Gree The								
Address Email grog thomos wu egmail. con									
βρ β _γ 52027									
City, State Zip South Charles don WU 25358									
City, State Zip_ South Charleston WV 25358									
2. R	2. Reporting period for which this activity report is being filed								
Check	Report Period	Due Date							
х	2023-3 9/1/23-12/31/2	3 1/15/24			* 1, 1				
3. Li	List all employers/organizations that you represent as a lobbyist Use additional reporting forms if necessary.								
1.	1. /4// 0/06/01								
2.	2. Car-source 5. Mon Health								
	2. Car-source 5. Mon Health 3. Marshall Universly 6. Liberty Institute Fund								
3									
4. Lobbying activity summary - If there was no activity or expenditures, indicate "none."									
Λ									
None									
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 Expendent								Total Expended	
		\$	Ś	S	\$	\$	S	\$	
Α.	Meals and Beverages	\$	\$	S	\$	S	\$	\$	
В.	Lodging	\$	\$	S	\$	\$	\$	\$	
C.	Advertising Travel	\$	\$	Š	Ś	s	\$	\$	
D. E.	Gifts	\$	\$	Ś	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	Š	S	\$	\$	\$	
G.	Group Expenditures	Ś	Ś	S	\$	\$	\$	\$	
Н.	Campaign Contributions	7	- X	PENDED" COLU	MN.		>	\$	
1	TOTAL of all expenditures	Ś	Ś	\$	\$	\$	\$	\$	
If you	sponsored or contributed to a	ny group event	or shared expe	nses, list the tot	al expended in c	ategory 5G imm	nediately above	e. Complete and	
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									