

West Virginia Ethics Commission
Lobbyist Activity Report Form
 2018-02

Received
SEP 14 2018
 WV Ethics Commission

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 Larry Puccio Phone 304-288-0522
 Address PO Box 327 Email larrypuccio@yahoo.com
 City, State Zip Fairmont, WV 26555

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

Check	Report	Period	Due Date				
x	2018-2	5/1/18-8/31/18	9/17/2018				

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

1. <u>iselectMD, LLC</u>	4. <u>MedExpress Urgent Care, Inc. - West Virginia</u>
2. <u>KVC Health Systems, Inc.</u>	5. <u>National Basketball Association</u>
3. <u>Major League Baseball</u>	6. <u>Optum, Inc.</u>

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

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 Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
C. Advertising	\$	\$	\$	\$	\$	\$	\$
D. Travel	\$	\$	\$	\$	\$	\$	\$
E. Gifts	\$	\$	\$	\$	\$	\$	\$
F. Other Expenses	\$	\$	\$	\$	\$	\$	\$
G. Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H. Campaign Contributions	<i>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</i>						\$
I. TOTAL of all expenditures	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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.

6. 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: [Signature] Date: 9/14/18

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Use additional reporting forms if necessary.

- | | |
|--------------------------------------|---|
| 1. <u>Pallottine Health Services</u> | 4. <u>Thompson Construction Group</u> |
| 2. <u>PGA Tour, Inc.</u> | 5. <u>United Health System, Inc./WV; United HealthCare Services, Inc.</u> |
| 3. <u>Southern Coal Corp</u> | 6. <u>Vertex Non Profit Holding, Inc.</u> |

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NONE

5. Expenditures

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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	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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.

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1. Charles Town HBPA, Inc. 4. FirstEnergy
 2. DraftKings Inc. 5. Frontier Communications Corp
 3. FanDuel, Inc. 6. Greenbrier Resort Hotel

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

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 Expended
A. Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
B. Lodging	\$	\$	\$	\$	\$	\$	\$
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H. Campaign Contributions	<i>LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.</i>						\$
I. TOTAL of all expenditures	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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Use additional reporting forms if necessary.

- 1. WV American Water 4. _____
- 2. WV Global Technology, Inc. 5. _____
- 3. _____ 6. _____

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

NONE

5. Expenditures

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H. Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						\$
I. TOTAL of all expenditures	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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