

Lobbyist Activity Report Form

2017-03

Received

JAN 04 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 Mark Polen Phone 304-345-2000
 Address LGCR Government Solutions Email mpolen@lgcr.com
300 Summers Street, Suite 700
 City, State Zip Charleston, WV 25301

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

Check	Report	Period	Due Date				
x	2017-3	9/1/17-12/31/17	1/15/2018				

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

- Highmark West Virginia Blue Cross Blue Shield
- West Virginia Cable Telecommunications Association
- TransCanada
- U.S. Cellular
- Pfizer
- EQT
- Rite Aid Corporation
- Wine Institute
- REM Community Options
- Comcast
- Community Associations of WV
- KEPRO

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

Matters of general business interest, telecommunications, oil and gas, pharmacy, alcohol, healthcare, Medicaid, insurance, retail operations

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

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