### SEP 13 2021

#### WV Ethics Commission

**West Virginia Ethics Commission** 

## **Lobbyist Activity Report Form**

2021-02

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)

Name	Larry F	ontact information OUCCIO		Phone 304-288-0522			
		ox 327		Email larrypuccio@yahoo.com			
01		airmont, WV	26555				
			activity report is being filed				
2. Re	porting p	eriod for which this	activity report is being filed				

- 3. List all employers/organizations that you represent as a lobbyist

  1. Accel Schools, LLC

  4. Bluestone Resources
  - 2. Alpha Metallurgical Resources, Inc. 5. Charles Town HBPA
  - Blue Rock Manufacturing 6. Citynet, LLC
- 4. Lobbying activity summary If there was no activity or expenditures, indicate "none."

  Broadband Communications, Business Issues, Charter Schools, Coal, Coal Mining, Construction, Economic Development,

  Energy Issues, Environment, Gaming, Health Care, Healthcare Services and Products, Jails/Prisons/Corrections,

  Mental Health, Regulations, Sports Betting, Taxation, Technology, Telephone/Telecommunications

5.	Expenditures							
lf no	expenditures, including campa	ign contributio	ns, mark here:					
If you	spent money on any public off gories per each employer you re	ficial, employee	or member of	his or her immed	,,	the amounts sp	ent in each of t	the following
Expenditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$
В.	Lodging	\$	\$	\$	\$	\$	\$	\$
C.	Advertising	\$	\$	\$	\$	\$	\$	\$
D.	Travel	\$	\$	\$	\$	\$	\$	\$
E.	Gifts	\$	\$	\$	\$	\$	5	\$
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$
H.	Campaign Contributions	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						
1.	TOTAL of all expenditures	\$	\$	Ś	\$	\$	\$	\$

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. N	ame and cor	ntact information								
Name Larry Puccio						Phone 304-288-0522				
	Address PO Box 327					Email larrypuccio@yahoo.com				
Addre	33					Eman				
City, S	tate Zip Fa	airmont, WV	26555							
2. R	eporting per	iod for which this	activity repor	is being filed						
Check	Report	Period	Due Date							
х	2021-2	5/1/21-8/31/21	9/15/21							
									P4	
3. L	ist all employ	yers/organization	s that you repr	esent as a lobb	yist	Use	e additional rep	oorting forms i	f necessary.	
1	Diversifi	ed Gas & O	il Corporat	ion	4. Gre	enbrier Re	sort Hotel			
2	First En	ergy Corpora	ation		, Opt	um, Inc				
_		Inc and its				Med, Inc				
3	<u>ooogio,</u>	110 0110 1007	· · · · · · · · · · · · · · · · · · ·		6					
A 1	abbuing activ	vity summary - If	there was no a	ctivity or avas	edituras indicat	" "nome"			A COLUMN TO THE PARTY OF THE PA	
	Water Williams Company of the Compan	the transmitted of the second					A' P	mi. Davidson		
		nunications, Bus								
Ener	gy Issues,	Environment,	Gaming, Hea	alth Care, He	althcare Serv	ices and Proc	lucts, Jails/P	risons/Corre	ctions,	
Mer	tal Healt	h, Regulatio	ns, Sports	Betting, Ta	axation, Te	chnology, T	elephone/	Telecomm	unications	
5. E	xpenditures	The state of the s		m At 1 Mars and 1 Additional and the second and the	With all the same of the same					
	Andrewson and the same of the	including campa	ian contributio	ns mark here:	~					
		on any public off				liate family, list t	the amounts sp	ent in each of t	he following	
		n employer you re							0	
	diture Catego		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
Α.	Meals and	Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging		\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	3	\$	\$	\$	\$	\$	\$	\$	
D.	Travel		\$	\$	S	\$	\$	\$	\$	
E.	Gifts		\$	\$	\$	\$	\$	\$	\$	
F.	Other Expe	enses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Exp	enditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign	Contributions	LIST AMOUN	T IN "TOTAL EX	PENDED" COLU	MN.			\$	
1.	-	Il expenditures	\$	\$	\$	\$	\$	\$	\$	
		r 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	
attach	a Schedule I	B for each event.								

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	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ress day past the trac	
1. N	me and co	ontact information		
Name	Larry P	uccio		Phone 304-288-0522
	, PO Bo			Email larrypuccio@yahoo.com
City, St	ate Zip F	airmont, WV	26555	
2. Re	porting pe	eriod for which this	activity report is being fi	ed
Check	Report	Period	Due Date	
x	2021-2	5/1/21-8/31/21	9/15/21	
3. Li	t all emple	oyers/organizations	that you represent as a	obbyist
1.	REM o	f West Virginia	, LLC	Urgent Care MSO, LLC aka MedExpress
		son Construct		5. Vertex Non Profit Holding, Inc.
			United HealthCare Service	s, Inc 6.
4. Lo	bbying act	ivity summary - If ti	nere was no activity or e	penditures, indicate "none."
Broad	band Com	munications, Busi	ness Issues, Charter S	chools, Coal, Coal Mining, Construction, Economic Development,
Energ	y Issues	, Environment, G	aming, Health Care,	Healthcare Services and Products, Jails/Prisons/Corrections,
				Taxation, Technology, Telephone/Telecommunications
5. E)	penditure	\$		
If no e	penditure	s, including campaig	an contributions, mark h	re: _ V _

categ	gories per each employer you re	present. Comp	elete and attach	Schedule A to t	his report.				
Expenditure Categories		Employer 1	Employer 2	Employer 3	Employer 4	Employer 5	Employer 6	Total Expended	
A.	Meals and Beverages	\$	\$	\$	\$	\$	\$	\$	
В.	Lodging	\$	\$	\$	\$	\$	\$	\$	
C.	Advertising	\$	\$	\$	\$	\$	\$	\$	
D.	Travel	\$	\$	\$	\$	\$	\$	\$	
E.	Gifts	\$	\$	\$	\$	\$	\$	\$	
F.	Other Expenses	\$	\$	\$	\$	\$	\$	\$	
G.	Group Expenditures	\$	\$	\$	\$	\$	\$	\$	
H.	Campaign Contributions	LIST AMOUN	LIST AMOUNT IN "TOTAL EXPENDED" COLUMN.						
1.	TOTAL of all expenditures	S	\$	\$	\$	\$	\$	\$	

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.