

## Financial Disclosure Statement Filing

Filing Confirmation # 30678

### Step 1: Statement Information

Report Year: **2023**  
Date Filed: **1/16/2024**  
Filing Type: **Original**  
Report Type: **Financial Disclosure**

**DELEGATE  
AND  
CANDIDATE**

### Name of Filer and Spouse

Filer First Name: **Heather**  
Filer Last Name: **Glasko-Tully**  
Spouse First Name: **Lawrence**  
Spouse Last Name: **Tully**  
County of Residence: **Nicholas**

### Step 1: Business Address

Name: **WV HOUSE OF DELEGATES**  
Address 1: **1900 Kanawha Blvd East**  
Address 2:  
City: **Charleston**  
State: **WV**  
Zip Code: **25305**

### Step 2: Candidate / Officeholder Information

Do you currently hold a county, circuit or state elected office?: **Yes**  
Title Of Office: **• WV House of Delegates**  
Are you presently a candidate for public office?: **Yes**  
For what office?: **WV House of Delegates**

Date you filed for candidacy?: 1/8/2024

### Step 3: Appointed Positions

No Positions to Report

### Step 4: Business Names

Type	Business Name
Spouse	Lawrence V. Tully
Spouse	Mavan
Spouse	Allaway
Self	LCG
Spouse	SJT

### Step 5: Employment

Type	Employer Name	Address	Description
Self	State of West Virginia--House of Delegates	1900 Kanawha Boulevard East Charleston, WV 25305	Elected Delegates
Self	Camden Family Health	10003 Webster Road Camden on Gauley, WV 26208	Family Nurse Practitioner

### Step 6: 20% Gross Income Categories

	Self	Spouse
<b>Companies</b> Timber		X
<b>Mining</b> Mining Equipment		X
<b>Oil or Gas</b> Exploration		X
<b>Oil or Gas</b> Production & Drilling		X

Self

Spouse

**Government**

State

X

**Other**

Hospitals or Other Health Care Providers

X

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

Type	Category / Source	Description
Spouse	Other	Interests in coal, oil, & gas properties
Self	Employment	Healthcare Provider--FNP
Spouse	Social Security	Social Security benefit eligible in August/September 2021
Self	Employment	Salary & per diem WV House of Delegates Legislative...
Spouse	Farming/Timbering	Sale of Timber
Self	Dividends	From Investment Accounts
Spouse	Dividends	From Investment Accounts

**Step 8: Business and/or Property Interests**

Type	Business Name	Address
Spouse	Mavan	P.O Box 203 Summersville, WV 26651
Self	LCG	PO Box 203 Summersville, WV 26651
Spouse	SJT	PO Box 203 Summersville, WV 26651
Spouse	Allaway	PO Box 203 Summersville, WV 26651

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

Neither my spouse nor I served on a Board of Directors or was an Officer

**Step 10: Non-Profit Organizations**

Neither my spouse nor I served on a Board of Directors or was an Officer

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

Neither my spouse nor I had any sales or contracts for goods or services to any unit of a state, county 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 any unit of state, county, or local government

**Step 13: Debts Owed to Others**

I have no reportable debts

**Step 14: Debts Owed to You**

I have no reportable debts

**Step 15: Gifts**

I have no received reportable gifts