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 Washington, DC 20510

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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

AMENDED

1. Registrant Name: THOMAS J. KUCZYNSKI

2. Address: Check if different than previously reported
4424 RANCHWOOD SPUR

3. Principal Place of Business (if different from line 2)
 City: AKRON State/Zip (or Country): OHIO 44333

4. Contact Name: SAME Telephone: 330-666-418V Email (optional):
 5. Senate ID #: 50422-12
 6. House ID #: 34686000

7. Client Name: Self
CONSOLIDATED NAT. GAS

8. Year: 1999 Midyear (January 1-June 30) OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report Termination Date: _____

11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

| | |
|--|--|
| <p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> <u>530,000</u> <small>Income (nearest \$20,000)</small></p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p> | <p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> <u>5</u> <small>Expenses (nearest \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p> |
|--|--|

Signature: _____

Printed Name and Title: _____

LD-7 (REV. 6/98) PAGE 1 OF 2

Registrant Name THOMAS J. KUCZYNSKI Client Name CONSOLIDATED NAT. GAS

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code UT1 (one per page)

16. Specific lobbying issues

1. LIHEAP - LOW INCOME HEATING ASSIST. PROG.
2. PIPELINE SAFETY
3. MMS OIL VALUATION RULE/SENATE APPROP.

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. HOUSE OF REPRESENTATIVES
U.S. SENATE

18. Name of each individual who acted as a lobbyist in this issue area

| Name | Covered District Number (if applicable) | New |
|----------------------------|---|--------------------------|
| <u>THOMAS J. KUCZYNSKI</u> | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature Thomas J. Kuczynski

Date 7-6-00

Printed Name and Title THOMAS J. KUCZYNSKI, Principal