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LOBBYING REPORT

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

1. Registrant Name Chesapeake Enterprises			
2. Address <input type="checkbox"/> Check if different than previously reported 1800 K Street, NW			
3. Principal Place of Business (if different from line 2) Washington DC 20006 City: State/zip (or Country)			
4. Contact Name J. John Fluharty	Telephone (202) 463-9677	E-mail (optional)	5. Senate ID # 898790
7. Client Name <input type="checkbox"/> Self Sun Health Care			6. House ID # 33783008

TYPE OF REPORT 8. Year 2000 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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<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>40,000.00</u> Income (nearest \$20,000)</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>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 type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opt</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(t) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature _____ Date 11/2/17

Printed Name and Title _____ J. John Fluharty

LD-2 (REV. 4/03)

PAGE 1 of

Registrant Name Chesapeake Enterprises Client Name Sun Health Care

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

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

16. Specific lobbying issues

health care financing


17. House(s) of Congress and Federal agencies contacted Check if None

House/Senate

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

Name	Covered Official Position (if applicable)
Scott W. Reed	
J. John Fluharty	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature  Date June 14, 200

Printed Name and Title J. John Fluharty

Form LD-2 (Rec. 4/03)

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