FORM L1-A Reporting For Calendar Year 2009

ELEC RECEIVED FEB 1 6 2010

ANNUAL REPORT GOVERNMENTAL AFFAIRS AGENT



FOR STATE USE ONLY

Amendment

| NEW JEKSET EFECTION FAM ENLOKCEMENT COMMISSION |
|---|
| P.O. Box 185, Trenton, NJ 08625-0185 |
| (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) |

Website: www.elec.state.nj.us

| Name of Go | overnmental Affairs Agent or Governmental Af | fairs Agent Firm: | | | |
|-----------------|--|---|---------------|------------|-----------|
| 1868 Publ | lic Affairs, LLC | | | | |
| Business | 15 West Front Street, 4th Floor | | | | |
| Address | | | | | |
| City | Trenton | State | NJ | Zip Code | 08608 |
| *(Area Code | e) Telephone Number <u>609-394-0888</u> | | | | |
| 1. Provide t | the following information regarding the Gove | rnmental Affairs Agent(s) on whose behalf | f this report | is filed. | |
| 1. Name F | Patrick Torpey | | | | |
| – Registrati | ion Number 1054-4 | Occupation or Business Government | Affairs Aq | ent | |
| _ | Address 15 West Front Street, 4th Floor | ••• | | | |
| City Tre | | State | NJ | Zip Code | 08608 |
| | ode) Telephone Number 609-394-0888 | | | | |
| | · | | | | |
| _ | Michael Torpey | | - 66 | | |
| | ion Number 1054-15 | Occupation or Business Government | Affairs Ag | ent | _ |
| | Address 15 West Front Street, 4th Floor | | | | |
| City Trei | nton | State | NJ : | Zip Code | 08608 |
| *(Area Co | ode) Telephone Number 609-394-0888 | | | | |
| 3. Name R | Richard Ambrosino | | | | |
| Registrati | ion Number 1054-17 | Occupation or Business Government / | Affairs Ag | ent | |
| _ | Address 15 West Front Street, 4th Floor | | | | |
| City Trei | | State | NJ : | Zip Code(| 08608 |
| *(Area Co | de) Telephone Number 609-394-0888 | | | | |
| | dida Dadriana | | | | |
| _ | dida Rodriguez | | A 66 : A | | |
| ٠. | on Number 1054-20 | Occupation or Business Government A | Affairs Age | ent | |
| | Address 15 West Front Street, 4th Floor | | N. 1 | | |
| City Trer | | State | NJ . | Zip Code (| J8608 |
| *(Area Co | de) Telephone Number <u>609-394-0888</u> | | | | |
| | | | | | |
| | | | | | |

| 1. Provide the following information regarding the | ne Governmental Affairs Agent(s) on w | hose behalf this re | port is filed. |
|--|---------------------------------------|---------------------|-----------------------|
| 1. Name LeRoy Jones, Jr. | | | |
| Registration Number 1054-21 | Occupation or Business Gov | ernment Affairs | Agent |
| Business Address 15 West Front Street, 4th | n Floor | | |
| City Trenton | | State NJ | Zip Code <u>08608</u> |
| *(Area Code) Telephone Number 609-394-08 | | | |
| 2. Name | | | |
| Registration Number | | | |
| Business Address | | | |
| City | | State | Zip Code |
| *(Area Code) Telephone Number | | | |
| 3. Name | | | |
| Registration Number | | | |
| Business Address | | | |
| City | | State | Zip Code |
| *(Area Code) Telephone Number | | | |
| 4. Name | | | |
| Registration Number | | | |
| Business Address | | | |
| City | | State | Zip Code |
| *(Area Code) Telephone Number | | | |
| | | | |
| | | | |
| | | | |

^{*}Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

| | D ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL THEIR ACTIVITY following information concerning those Represented Entities who have design | nate | d tl | his report to include their activity. |
|---------------------|--|-------------|------|---|
| Note: For eac | ch Represented Entity, Form L-2 must be filed. | | | |
| 1. Name of Repre | esented Entity NJ Section-American Water Works Association (NJA) | W | VA) | |
| Business Address | NJ American Water, PO Box 5079 | _ | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City Cherry Hil | II Sta | te | NJ | Zip Code 08034 |
| Type of Business | Association (water purveyor) | | _ | |
| 2. Name of Repre | esented Entity WalMart Stores, Inc. | | | |
| Business Address | 700-76 Broadway | _ | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying |
| Addiess | | _ | | activity for this entity. |
| City Westwoo | d Sta | te | NJ | Zip Code 07675 |
| Type of Business | Retail | | | |
| 3. Name of Repre | esented Entity Johnson Controls, Inc. | | | |
| Business Address | 507 East Michigan St. | _ | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City Milwauke | ee Sta | —∟ te ˈ | WI | |
| Type of Business | Climate Control Products | | | |
| . 4. Name of Repre | esented Entity Bally Technologies | | | |
| Business Address | 6601 South Bermuda Rd. | _ | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City Las Vegas | Sta | te <u> </u> | N۷ | Zip Code 89119 |
| Type of Business | Gaming | | | |
| 5. Name of Repre | esented Entity Kennedy Health Systems (KHS) | _ | | |
| Business Address | 1009 White Horse Rd. | - - | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City Voorhees | Sta | te <u>l</u> | ŊJ | Zip Code 08043 |
| Type of Business | Health Care Facility | _ | | |
| | | | | |

| 2. REPRESENTED ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL THEIR ACTIVITY Provide the following information concerning those Represented Entities who have designated this report to include their activity. | | | | |
|--|--|--------------------|------------|---|
| Note: For eac | ch Represented Entity, Form L-2 must be filed. | | | |
| 1. Name of Repr | esented Entity Somerset County Parks Commission (SCPC) | | | |
| Business Address | 355 Milltown Road | - [| | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City Bridgewa | iter Sta | —∟ ite <u>l</u> | N) | Zip Code 08807 |
| Type of Business | County Park Commission | • | | |
| 2. Name of Repr | esented Entity Forthright | | | |
| Business | c/o National Arbitration Forum | _ _ | \neg | Check if communication with the general public ("Grassroots |
| Address | 285 Davidson Ave., Ste. 502 | _[| _ | Lobbying") was the only lobbying activity for this entity. |
| City Somerset | Sta | te <u>N</u> | 1 J | Zip Code <u>08873</u> |
| Type of Business | Arbitration | | | |
| 3. Name of Repr | esented Entity Verizon-New Jersey | | | |
| Business Address | 540 Broad Street, 17th Floor | _ _ [| | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City Newark | Sta | te <u>N</u> | 1) | Zip Code <u>07102</u> |
| Type of Business | Communication | | | <u> </u> |
| 4. Name of Repr | esented Entity Sodexho, Inc. | | | |
| Business | 9810 Washingtonian Blvd., Ste 1237 | _ _ | 7 | Check if communication with the general public ("Grassroots |
| Address | | _[| _ | Lobbying") was the only lobbying activity for this entity. |
| City Gaithersb | ourg Sta | te <u>N</u> | ۸D | Zip Code 20878 |
| Type of Business | Food Services | | _ | |
| 5. Name of Repre | esented Entity NJ Wine & Spirits Wholesalers Association (NJWSWA |) | | |
| Dusiness | c/o Allied Beverage | _ _ | 7 | Check if communication with the general public ("Grassroots |
| Address | 600 Washington Ave. | _[| _ | Lobbying") was the only lobbying activity for this entity. |
| City Carlstadt | Star | te <u>N</u> | IJ | Zip Code 07072 |
| Type of Business | Association | | | |
| | | | | |
| | | | | |
| | | | | |

| Business Address General public ("Grassroots Lobbying") was the only lobbyin activity for this entity. | l . | D ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL THEIR ACTIVITY following information concerning those Represented Entities who have design | gnat | ed t | his report to include their activity. |
|--|----------------------|--|------------|---------|---|
| Business Address Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 07102-4194 | Note: For eac | th Represented Entity, Form L-2 must be filed. | | | |
| Business Address Business Address Business P20 Broad Street Business Address City Newark State NJ Zip Code 07102-4194 Type of Business P20 Broad Street Business Address City Newark State NJ Zip Code 07102-4194 Type of Business Address City Government 3. Name of Represented Entity Opportunities for All (OFA) Business Address 1733 S. Broad Street Business Address City Government 3. Name of Represented Entity Opportunities for All (OFA) Business Address 1733 S. Broad Street Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Hamilton Type of Business Re-Entry Programs 4. Name of Represented Entity Babyland Family Services 755 South Orange Ave. Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 08610 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity of this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity of this entity. Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity of this entity. City Newary Vork State NJ Zip Code 07106 | 1. Name of Repr | esented Entity PSE & G | | | |
| City Newark Type of Business Energy Company 2. Name of Represented Entity Business Address 2. Name of Represented Entity City of Newark State 3. Name of Represented Entity City Government 3. Name of Represented Entity Business Address City Government 3. Name of Represented Entity City Hamilton State Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City Hamilton State NJ Zip Code 07102 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NJ Zip Code 07106 | | 80 Park Plaza- T4A | _ | | Lobbying") was the only lobbying |
| 2. Name of Represented Entity City of Newark Business Address 920 Broad Street Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 07102 Type of Business City Government 3. Name of Represented Entity Opportunities for All (OFA) Business Address Check if Communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Hamilton State NJ Zip Code 08610 Type of Business Re-Entry Programs 4. Name of Represented Entity Babyland Family Services Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark Type of Business Family Services 5. Name of Represented Entity Marl Associates Check if Communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. Check if Communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. Check if Communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. Check if Communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. | City Newark | | tate | L L | Zip Code 07102-4194 |
| Business Address Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City Newark | Type of Business | Energy Company | | | |
| Business Address State St | 2. Name of Repr | esented Entity City of Newark | | | |
| Type of Business City Government 3. Name of Represented Entity Opportunities for All (OFA) Business Address 1733 S. Broad Street City Hamilton Type of Business Re-Entry Programs 4. Name of Represented Entity Babyland Family Services Business Address 755 South Orange Ave. City Newark Type of Business Family Services State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City New York State NY Zip Code 10019 | | 920 Broad Street | | | Lobbying") was the only lobbying |
| 3. Name of Represented Entity Opportunities for All (OFA) Business Address 1733 S. Broad Street | City Newark | S | tate | NJ L | |
| Check if communication with the general public ("Grassroots Lobbying") was the only lobbyin activity for this entity. City Hamilton | Type of Business | City Government | | | |
| Business Address Total Street General public ("Grassroots Lobbying") was the only lobbyin activity for this entity. | 3. Name of Repre | esented Entity Opportunities for All (OFA) | | | |
| City Hamilton State NJ Zip Code 08610 Type of Business Re-Entry Programs 4. Name of Represented Entity Babyland Family Services Business Address 755 South Orange Ave. City Newark City Newark Type of Business Family Services 5. Name of Represented Entity Marl Associates Business Address 200 Central Park South City New York City New York City New York City New York State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | | 1733 S. Broad Street | | | Lobbying") was the only lobbying |
| 4. Name of Represented Entity Babyland Family Services Business Address 755 South Orange Ave. City Newark Type of Business Family Services 5. Name of Represented Entity Marl Associates Business Address 200 Central Park South City New York City New York State NJ Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | City <u>Hamilton</u> | St | ate | NJ | |
| Business Address 755 South Orange Ave. Business Address City Newark City Newark Type of Business Business Address Business Address Business Address Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City Newark State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | Type of Business | Re-Entry Programs | | | |
| Business Address Total Newark Type of Business Family Services State NJ Zip Code 07106 Type of Represented Entity Marl Associates Business Address 200 Central Park South Address City New York City New York State NJ Zip Code 07106 Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. State NY Zip Code 10019 | 4. Name of Repre | esented Entity Babyland Family Services | | _ | |
| Type of Business Family Services 5. Name of Represented Entity Marl Associates Business Address 200 Central Park South General public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | Dusiness | 755 South Orange Ave. | _ | | Lobbying") was the only lobbying |
| 5. Name of Represented Entity Marl Associates Business Address Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | City <u>Newark</u> | St | ate | NJ | Zip Code <u>07106</u> |
| Business 200 Central Park South Address Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | Type of Business | Family Services | | | |
| Business Address 200 Central Park South general public ("Grassroots Lobbying") was the only lobbying activity for this entity. City New York State NY Zip Code 10019 | 5. Name of Repre | esented Entity Marl Associates | | | |
| City New York State NY Zip Code 10019 | Dusiness | 200 Central Park South | _ | | Lobbying") was the only lobbying |
| Type of Business Real Estate Development | City New York | St | ا—ر ate | NY | |
| | Type of Business | Real Estate Development | | _ | |
| New Jersey Election Law Enforcement Commission Page 5 of 14 Form L1-A Revised Oct. 20 | | | | | Form L1-A Revised Oct. 2009 |

| | ED ENTITIES DESIGNATING THIS REPORT TO INC following information concerning those Repre | | d th | nis report to include their activity. |
|---------------------|--|---------|------|---|
| Note: For ea | ach Represented Entity, Form L-2 must be filed. | | | |
| 1. Name of Rep | presented Entity TRC | | | |
| Business Address | 21 Griffin Road | | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City North W | indsor | State | ст | Zip Code 06095 |
| Type of Busines | Engineering | | | |
| 2. Name of Rep | presented Entity | | | |
| Business | | | _ | Check if communication with the general public ("Grassroots |
| Address | | | Ш | Lobbying") was the only lobbying activity for this entity. |
| City | - | State | | Zip Code |
| Type of Busines | s | | | |
| 3. Name of Rep | resented Entity | | | |
| Business Address | | | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City | | State _ | | Zip Code |
| Type of Busines | s | | | |
| 4. Name of Rep | resented Entity | | | |
| Business Address | | | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City | | State | | Zip Code |
| Type of Busines | s | | | |
| 5. Name of Rep | resented Entity | | | |
| Business Address | | | | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying activity for this entity. |
| City | | State | | Zip Code |
| Type of Business | s | | | |
| | | | | |
| | | | | |
| | | | | |

| 2a. OTHER REPRESENTED ENTITIES Provide the following information concerning other | Represented Entites. |
|---|---|
| Name of Represented Entity | |
| Business Address | Check if communication with the general public ("Grassroots Lobbying") was the only lobbying |
| City | State Zip Code |
| Type of Business | |
| 2. Name of Represented Entity | |
| Business | Check if communication with the |
| Address | Lobbying") was the only lobbying activity for this entity. |
| City | State Zip Code |
| Type of Business | |
| 3. Name of Represented Entity | |
| Business | Check if communication with the general public ("Grassroots |
| Address | Lobbying") was the only lobbying activity for this entity. |
| City | State Zip Code |
| Type of Business | |
| 4. Name of Represented Entity | |
| Business | Check if communication with the |
| Address | Lobbying") was the only lobbying activity for this entity. |
| City | State Zip Code |
| Type of Business | |
| 5. Name of Represented Entity | |
| Business | Check if communication with the general public ("Grassroots |
| Address | Lobbying") was the only lobbying activity for this entity. |
| City | State Zip Code |
| Type of Business | |
| | |
| | |

| | SCHEDULE A | |
|--|--|--------------|
| Did any Governmental Affairs Agent no. | amed in this Annual Report serve as a member of: | |
| > any independent State authori | ity; | |
| > any county improvement auth | ority; | |
| > any municipal utilities authorit | | |
| | nority as a member from New Jersey; or, | |
| | blished by statute or resolution, or by executive order of the Governor, or by the Department or other instrumentality of the State? | |
| ☐ No If "no," continue on to the | next question. Yes If "yes," please provide the following information: | |
| Name of Governmental Affairs Agent | Richard Ambrosino | |
| Name of Authority, Board, or Commission | Camden County Board of Elections | |
| Date When Term of Service Expires | March 30, 2010 | |
| Name of Governmental Affairs Agent | Idida Rodriguez | |
| Name of Authority, Board, or Commission | Passaic Valley Water Commission | |
| Date When Term of Service Expires | December 2012 | |
| Name of Governmental Affairs Agent | Idida Rodriguez | |
| Name of Authority, Board, or Commission | Local Finance Board | |
| Date When Term of Service Expires | January 2015 | |
| Name of Governmental Affairs Agent | · | |
| Name of Authority, Board, or Commission | · | |
| Date When Term of Service Expires | | |
| | | |
| Did all Governmental Affairs Agent(s required during the calendar year co | s) named in this Annual Report file all Notices of Representation and Quarterly Rovered by this Annual Report? | Reports |
| Yes If "yes," continue on to | Schedule B. No If "no," please file the necessary reports immediately. | |
| New Jersey Election Law Enforcement Commission | Page 8 of 14 Form L1-A Revi | sed Oct 2009 |

SCHEDULE B-SALARY & COMPENSATION

PURPOSE: To report the salary and compensation paid to the Governmental Affairs Agents on whose behalf this report is filed. Include the reimbursement of an Agent's expenses in amounts reported.

NOTE: Only the pro rata share of each Governmental Affairs Agent's salary and compensation need to be included if the Agent spends only a portion of his/her time on lobbying activity.

| NAME OF GOVERNMENTAL AFFAIRS AGENT | AMOUNT |
|------------------------------------|---------------|
| LeRoy Jones | \$ 110,263.00 |
| Patrick Torpey | 98,021.00 |
| Idida Rodriguez | 84,288.00 |
| Michael Torpey . | 82,392.00 |
| Richard Ambrosino | 6,220.00 |
| | |
| | |
| | |
| | |
| SCHEDULE B TOTAL | \$ 381,184.00 |
| | |

SCHEDULE C - SUPPORT PERSONNEL

PURPOSE: To report the costs of support personnel who, over the course of the reporting year, individually spend 450 or more hours supporting the activities of the Governmental Affairs Agent(s).

After determining to which person(s) this applies, report the pro rata share of those costs which are attributable to supporting the activities of the Governmental Affairs Agent(s) in influencing legislation, regulations, governmental processes, or communicating with the general public.

SCHEDULE C TOTAL \$ ______ 29,207.00

NO SCHEDULE D FOR GOVERNMENTAL AFFAIRS AGENTS

SCHEDULE E - COMMUNICATION EXPENSES

PURPOSE: To report the costs of the preparation and distribution of materials related to influencing legislation, regulations, governmental processes, and conducting communications with the general public.

| EXPEN | SE | AMOUNT |
|---|---|---|
| Printed Materials | | \$ 0.00 |
| Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medic | um, including the Internet | 0.00 |
| Postage | | 0.00 |
| Telephone, Telegram, Facsimile | | 15,006.00 |
| Pro Rata Overhead Costs of Specific Events Over \$100 (plea. | se identify name and date of event) | 0.00 |
| | | |
| | | · · |
| | | |
| | | |
| | | |
| Other (please describe): | | 2.455.00 |
| GovNet-Bill Tracking | | 3,465.00 |
| | | |
| | | |
| | | |
| , • | SCHEDULE E TO | DTAL \$18,471.00 |
| SCHEDU | LE F-TRAVEL/LODGING | |
| PURPOSE: To report the travel and lodging costs of the C influencing legislation, regulations, governm | Governmental Affairs Agents on whose behall ental processes, or communicating with the o | f this report is filed related to general public. |
| NAME OF GOVERNMENT | AL AFFAIRS AGENT | AMOUNT |
| | | \$ 0.00 |
| | | |
| | | |
| | | |
| | | |
| | SCHEDULE F TO | OTAL \$ |
| | | |
| New Jersey Election Law Enforcement Commission | Page 10 of 14 | Form L1-A Revised Oct. 2009 |

SCHEDULE G-1

ITEMIZATION OF BENEFITS WHICH EXCEEDED \$25 PER DAY OR \$200 PER CALENDAR YEAR TO STATE OFFICIALS AND THEIR IMMEDIATE FAMILY MEMBERS

PURPOSE: To report detailed information concerning benefits passed to State officials covered by the Act, as well as the immediate family members of these officials. If the value of a benefit exceeded \$25 per day or \$200 per calendar year, report below.

(Select one description item for each entry from the drop down list. When selecting "O - Other", enter a description in the space provided.)

| Name of Benefit Reci | pient | | | |
|-------------------------------|---|---------------|-----------|------|
| Date | Description | | Amount \$ | 0.00 |
| Name and Address of Name | f Payee/Vendor | | | |
| | | | | |
| | | | Zip Code | |
| | rsed, please report the date, the description, a | and the amour | | |
| Description | | | | |
| Name of Benefit Reci | pient | • | | |
| Date | | | | 0.00 |
| Name and Address of Name | | | | |
| | · | | | |
| | | | | |
| | rsed, please report the date, the description, a | nd the amour | | |
| Description | | | | |
| Name of Benefit Reci | Dient | | | |
| Date | Description | | Amount \$ | 0.00 |
| Name and Address o | | | | |
| Address | | | | |
| City | | State | Zip Code | |
| If benefit was reimbu Date | rsed, please report the date, the description, a Amount \$ | | | |
| Description | | | | |
| Name of Benefit Reci | pient | | | |
| Date | Description | | Amount \$ | 0.00 |
| Name and Address o Name | | | | |
| Address | - | | | |
| City | | | Zip Code | |
| If benefit was reimbu Date | rsed, please report the date, the description, a Amount \$ | nd the amoun | | |
| | | | | |
| | | | | |

| CILBARA | | OF BELIEFE | |
|---------|-----|------------|-----------|
| | AKY | OF BENEFI | I PA\\ING |
| | | | |

PURPOSE: To report the total amount of providing benefits to State officials covered by the Act and their immediate family members.

| | SCHEDULE G-1* | SCHEDULE G-2** | AMOUNT |
|-------------------|---------------|----------------|------------------|
| Entertainment | \$ | +\$ | = \$ |
| Food and Beverage | | + | = |
| Travel | | + | = |
| Lodging | | + | = |
| Honoraria | | + | = |
| Loans | | + | = |
| Gifts | | + | = |
| Other (specify) | | + | = |
| Total | \$0.00 | +\$0.00 | = \$0.00 |
| | | | SCHEDULE G-1 AND |

SCHEDULE G-1 AND SCHEDULE G-2 TOTAL

^{**} Enter, by category, the value of benefit passing where the expenditure did NOT exceed the \$25/day or \$200/calendar year thresholds.

| ENTER THE TOTAL AMOUNT OF REIMBURSED BENEFITS, IF ANY. |
|--|
| DO NOT DEDUCT THIS AMOUNT FROM RENEEL PASSING AMOUNTS |

\$

0.00

SUMMARY OF LOBBYING EXPENDITURES

EXPENDITURES

| 1. Salary and Compensation | Schedule B Total | \$ 381,184.00 |
|----------------------------|-------------------------------------|------------------|
| 2. Support Personnel | Schedule C Total | 29,207.00 |
| 3. Communication Expenses | Schedule E Total | 18,471.00 |
| 4. Travel and Lodging | Schedule F Total | 0.00 |
| 5. Benefit Passing | Schedule G-1 and Schedule G-2 Total | 0.00 |
| | Total Lobbying Expenditures | \$ 428,862.00 |

^{*} After completing all entries on Schedule G-1, provide totals by category.

RECEIPTS TABLE

PURPOSE: To report all fees, retainers, allowances, reimbursement of expenses, or other compensation received from Represented Entities for the purpose of influencing legislation, regulations, governmental processes, or communicating with the general public.

NOTE: Report only the pro rata share of each receipt which is related to influencing legislation, regulations, governmental processes, or communicating with the general public.

| REPRESENTED ENTITY | AMOUNT |
|---|--------------|
| 1. Marl Associates | \$ 10,000.00 |
| 2. Babyland | 3,500.00 |
| 3. Bally | 18,000.00 |
| 4. City of Newark | 100,000.00 |
| 5. Forthright | . 48,000.00 |
| 6. Johnson Controls | 41,615.06 |
| 7. Kennedy Health Systems | 49,500.00 |
| 8. NJWSWA | 24,000.00 |
| 9. NJAWWA | 13,000.00 |
| 10. Opportunities for All | 6,000.00 |
| 11. PSE & G | 72,000.00 |
| 12. Sodexho | 26,120.00 |
| 13. Somerset County Parks Commissioners | 27,500.00 |
| 14. TRC | 10,500.00 |
| 15. Verizon-New Jersey | 60,000.00 |
| 16. WalMart Stores, Inc. | 25,900.00 |
| 17. | |
| 18. | |

| TOTAL RECEIPTS | \$ | 535,635.06 |
|---------------------|----|------------|
| I O I AL RECEIT I J | 4 | 333,033.00 |

| CERTIFICATION | | | |
|---|------|--|--|
| This certification shall be signed by either the Governmental Affairs Agent filing the Managing or Principal Partner or Chief Executive Officer of the Governmental Affairs | | | |
| ı, Patrick Torpey | | | |
| (print name) | | | |
| hereby certify that I am duly authorized by | | | |
| 1868 Public Affairs, LLC | | | |
| (print name of firm) | | | |
| to file and certify the accuracy and correctness of this Annual Report of Lobbying Activity for calendar year 2009. I certify that the statements made herein are true and accurate. I am aware that if any of the foregoing statements are willfully false, I may be subject to punishment. February 16, 2010 | | | |
| Signature | Date | | |