FORM L1-A Reporting For Calendar Year 2010

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ANNUAL REPORT GOVERNMENTAL AFFAIRS AGENT



NEW JERSEY ELECTION LAW ENFORCEMENT 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

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|------------------|--|--|-------------|-----------------------|
| Name of Go | overnmental Affairs Agent or Governmental | Affairs Agent Firm: | | |
| Cammara | no and Hagan Partners, LLC | | | |
| Business | 222 W. State Street | | | |
| Address | Suite 302 | | | |
| City | Trenton | State | NJ | Zip Code <u>08608</u> |
| *(Area Cod | e) Telephone Number 609-392-2332 | | | |
| 1. Provide | the following information regarding the Gov | ernmental Affairs Agent(s) on whose behalf | this report | is filed. |
| 1. Name <u>I</u> | Peter Cammarano | | | |
| Registrat | ion Number 1741-1 | Occupation or Business Governmenta | l Affairs | |
| Business | Address (Same as above) | | | |
| City | | | | Zip Code |
| *(Area Co | ode) Telephone Number | | | |
| | Z + d= 11= === | | | |
| Registrat | Registration Number 1741-2 Occupation or Business Governmental Affairs | | | |
| Business | Address (Same as above) | | | |
| City | | State | | Zip Code |
| *(Area Co | ode) Telephone Number | | | |
| | Milliam Layton | | | |
| Registrat | ion Number <u>1741-3</u> | Occupation or Business Governmenta | I Affairs | |
| Business | Address (Same as above) | | | |
| City | | State | | Zip Code |
| *(Area Co | ode) Telephone Number | | | |
| 4. Name | | | | |
| Registrat | ion Number | Occupation or Business | | |
| | Address | | | |
| City | | State | | Zip Code |
| *(Area Co | ode) Telephone Number | · · · · · · · · · · · · · · · · · · · | | |
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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 | | |
|-------------|--|--------------------------|--|--|
| Peter Camr | marano | \$ 316,400.00 | | |
| Kevin Haga | an | 316,400.00 | | |
| William Lay | /ton | 94,800.00 | | |
| | | | | |
| | | | | |
| | | | | |
| | SCHEDULE B TOTAL \$ | 727,600.00 | | |
| PURPOSE: | SCHEDULE C - SUPPORT PERSONNEL To report the costs of support personnel who, over the course of the reporting year, individually and the course of the reporting year. | dually spend 450 or more | | |
| i oli ost. | 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, reprocesses, or communicating with the general public. | gulations, governmental | | |
| | | | | |

NO SCHEDULE D FOR GOVERNMENTAL AFFAIRS AGENTS

CERTIFICATION

| nis certification shall be signed by either the Governmental Affairs Agent i anaging or Principal Partner or Chief Executive Officer of the Governmen | |
|--|-------------------|
| Peter F. Cammarano | |
| (print name) | |
| hereby certify that I am duly authorized by | |
| Cammarano and Hagan Partners, LLC | |
| (print name of firm) | |
| of file and certify the accuracy and correctness of this Annual Report of Lob certify that the statements made herein are true and accurate. I am aware lse, I may be subject to punishment. | |
| Jets J. Signature | February 14, 2011 |
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