

FORM L1-A
Reporting For Calendar Year 2010

ANNUAL REPORT
OF
GOVERNMENTAL AFFAIRS AGENT



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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

Amendment

Name of Governmental Affairs Agent or Governmental Affairs Agent Firm:

Delta Development Group, Inc.

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

1. Provide the following information regarding the Governmental Affairs Agent(s) on whose behalf this report is filed.

1. Name Daniel Kennedy

Registration Number 1852-1 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

2. Name Jason Yakelis

Registration Number 1852-2 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

3. Name Scott Tochterman

Registration Number 1852-3 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

4. Name Nathan Garman

Registration Number 1852-4 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

1. Provide the following information regarding the Governmental Affairs Agent(s) on whose behalf this report is filed.

1. Name Joseph Eisenhauer

Registration Number 1852-5 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

2. Name Phillip Sanchez

Registration Number 1852-6 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number 717-441-9030

3. Name Alexander Pavlovsky

Registration Number 1852-7 Occupation or Business Consulting firm

Business Address 2000 Technology Parkway

City Mechanicsburg State PA Zip Code 17050

*(Area Code) Telephone Number _____

4. Name _____

Registration Number _____ Occupation or Business _____

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.

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 each Represented Entity, Form L-2 must be filed.

1. Name of Represented Entity Shore Mall Associates, L.P.

Business Address 44 South Bayles Avenue

Check if communication with the general public ("Grassroots Lobbying") was the **only** lobbying activity for this entity.

City Port Washington State NY Zip Code 11050

Type of Business Real Estate Developer

2. Name of Represented Entity Woolwich Commons, LLC

Business Address 120 West Germantown Pike, Suite 120

Check if communication with the general public ("Grassroots Lobbying") was the **only** lobbying activity for this entity.

City Plymouth Meeting State PA Zip Code 19452

Type of Business Real Estate Developer

3. Name of Represented Entity Vornado Realty Trust

Business Address 210 East State Route 4

Check if communication with the general public ("Grassroots Lobbying") was the **only** lobbying activity for this entity.

City Paramus State NJ Zip Code 07652

Type of Business Real Estate Developer

4. Name of Represented Entity Pineville Properties, LLC

Business Address 1288 Valley Forge Road
#987 Unit 66

Check if communication with the general public ("Grassroots Lobbying") was the **only** lobbying activity for this entity.

City Phoenixville State PA Zip Code 19460

Type of Business Real Estate Developer

5. Name of Represented 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 _____

2a. OTHER REPRESENTED ENTITIES

Provide the following information concerning other Represented Entities.

1. Name of Represented 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 _____

2. Name of Represented 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 _____

3. Name of Represented 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 _____

4. Name of Represented 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 _____

5. Name of Represented 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 _____

SCHEDULE A

1. Did any Governmental Affairs Agent named in this Annual Report serve as a member of:

- ▶ any independent State authority;
- ▶ any county improvement authority;
- ▶ any municipal utilities authority;
- ▶ any inter-State or bi-State authority as a member from New Jersey; or,
- ▶ any board or commission established by statute or resolution, or by executive order of the Governor, or by the Legislature, or by any Agency, 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	_____
Name of Authority, Board, or Commission	_____
Date When Term of Service Expires	_____
Name of Governmental Affairs Agent	_____
Name of Authority, Board, or Commission	_____
Date When Term of Service Expires	_____
Name of Governmental Affairs Agent	_____
Name of Authority, Board, or Commission	_____
Date When Term of Service Expires	_____
Name of Governmental Affairs Agent	_____
Name of Authority, Board, or Commission	_____
Date When Term of Service Expires	_____

2. Did all Governmental Affairs Agent(s) named in this Annual Report file all Notices of Representation and Quarterly Reports required during the calendar year covered by this Annual Report?

Yes If "yes," continue on to Schedule B. No If "no," please file the necessary reports immediately.

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
Daniel Kennedy	\$ 27,842.00
Jason Yakelis	274.00
Scott Tochterman	4,750.00
Nathan Garman	6,330.00
Joseph Eisenhauer	4,220.00
Phillip Sanchez	5,074.00
Alexander Pavlovsky	9,396.00
SCHEDULE B TOTAL \$	57,886.00

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 \$ 0.00

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.

EXPENSE	AMOUNT
Printed Materials	\$ 3,438.00
Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet	0.00
Postage	225.82
Telephone, Telegram, Facsimile	162.25
Pro Rata Overhead Costs of Specific Events Over \$100 <i>(please identify name and date of event)</i>	
<i>Other (please describe):</i>	
SCHEDULE E TOTAL \$	<u>3,826.07</u>

SCHEDULE F - TRAVEL/LODGING

PURPOSE: To report the travel and lodging costs of the Governmental Affairs Agents on whose behalf this report is filed related to influencing legislation, regulations, governmental processes, or communicating with the general public.

NAME OF GOVERNMENTAL AFFAIRS AGENT	AMOUNT
Daniel Kennedy	\$ 1,882.01
Jason Yakelis	274.97
Scott Tochterman	20.54
Nathan Garman	534.96
Joseph Eisenhauer	178.47
SCHEDULE F TOTAL \$	<u>2,890.95</u>

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.

EXPENSE	AMOUNT
Printed Materials	\$
Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet	
Postage	
Telephone, Telegram, Facsimile	
Pro Rata Overhead Costs of Specific Events Over \$100 <i>(please identify name and date of event)</i>	
Other <i>(please describe)</i> :	
SCHEDULE E TOTAL \$	

SCHEDULE F - TRAVEL/LODGING**PURPOSE:** To report the travel and lodging costs of the Governmental Affairs Agents on whose behalf this report is filed related to influencing legislation, regulations, governmental processes, or communicating with the general public.

NAME OF GOVERNMENTAL AFFAIRS AGENT	AMOUNT
Phillip Sanchez	\$ 46.42
Alexander Pavlovsky	482.65
SCHEDULE F TOTAL \$	529.07

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 Recipient _____

Date _____ Description _____ Amount \$ _____

Name and Address of Payee/Vendor

Name _____

Address _____

City _____ State _____ Zip Code _____

If benefit was reimbursed, please report the date, the description, and the amount of the reimbursement.

Date _____ Amount \$ _____

Description _____

Name of Benefit Recipient _____

Date _____ Description _____ Amount \$ _____

Name and Address of Payee/Vendor

Name _____

Address _____

City _____ State _____ Zip Code _____

If benefit was reimbursed, please report the date, the description, and the amount of the reimbursement.

Date _____ Amount \$ _____

Description _____

Name of Benefit Recipient _____

Date _____ Description _____ Amount \$ _____

Name and Address of Payee/Vendor

Name _____

Address _____

City _____ State _____ Zip Code _____

If benefit was reimbursed, please report the date, the description, and the amount of the reimbursement.

Date _____ Amount \$ _____

Description _____

Name of Benefit Recipient _____

Date _____ Description _____ Amount \$ _____

Name and Address of Payee/Vendor

Name _____

Address _____

City _____ State _____ Zip Code _____

If benefit was reimbursed, please report the date, the description, and the amount of the reimbursement.

Date _____ Amount \$ _____

Description _____

SUMMARY OF BENEFIT PASSING

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	\$ _____	+ \$ _____	= \$ _____

**SCHEDULE G-1 AND
SCHEDULE G-2 TOTAL**

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

** 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 BENEFIT PASSING AMOUNTS.**

\$ _____

SUMMARY OF LOBBYING EXPENDITURES

EXPENDITURES

1. Salary and Compensation	Schedule B Total	\$ _____	57,886.00
2. Support Personnel	Schedule C Total	_____	0.00
3. Communication Expenses	Schedule E Total	_____	3,826.07
4. Travel and Lodging	Schedule F Total	_____	3,420.02
5. Benefit Passing	Schedule G-1 and Schedule G-2 Total	_____	0.00
Total Lobbying Expenditures		\$ _____	65,132.09

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. Shore Mall Associates, L.P.	\$ 195,948.78
2. Woolwich Commons, LLC	24,822.26
3. Vornado Realty Trust	100,035.01
4. Pineville Properties, LLC	6,000.00
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
18.	
	TOTAL RECEIPTS \$ 326,806.05

CERTIFICATION


This certification shall be signed by either the Governmental Affairs Agent filing this Annual Report on his/her own behalf, or by the Managing or Principal Partner or Chief Executive Officer of the Governmental Affairs Agent Firm.

I, Anthony B. Seitz, Esq.
(print name)

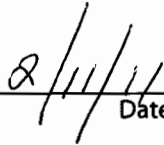
hereby certify that I am duly authorized by

Delta Development Group, Inc.
(print name of firm)

to file and certify the accuracy and correctness of this Annual Report of Lobbying Activity for calendar year 2010.
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.



Signature



Date