# FORM L1-A Reporting For Salendar Year 2010

2011 FEB 23 ₱ 1:00

## N.J. ELECTION LAW ENFORCEMENT FOR STATEMS BONLY

Amendment 🗸

# ANNUAL REPORT OF 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

| Name of Go   | vernmental Affairs Agent or Governmental A  | ffairs Agent Firm:                    |                   |                        |
|--------------|---|---------------------------------------|-------------------|------------------------|
| KOMJATH      | Y & STEWART, LLC                            |                                       |                   |                        |
| Business     | 142 West State Street                       |                                       |                   |                        |
| Address      | 2nd Floor                                   |                                       |                   |                        |
| City         | Trenton                                     |                                       | State NJ          | Zip Code 08608         |
| *(Area Code  | e) Telephone Number                         |                                       |                   |                        |
| 1. Provide t | he following information regarding the Gove | ernmental Affairs Agent(s) on whose t | oehalf this repor | t is filed.            |
| 1. Name A    | ladar G. Komjathy                           |                                       |                   |                        |
| Registrati   | on Number 1479-1                            | Occupation or Business Legislativ     | ve Agent          |                        |
| Business /   | Address 142 West State Street, 2nd Flo      | or                                    |                   |                        |
| City Tre     | nton  |                                       | State NJ          | Zip Code <u>0</u> 8608 |
| *(Area Co    | de) Telephone Number 609-695-5840           |                                       |                   |                        |
| 2. Name E    | ileen Kean                                  |                                       |                   |                        |
| Registrati   | on Number 1479-3                            | Occupation or Business Legislativ     | ve Agent          |                        |
| Business /   | Address 142 West State Street, 2nd Flo      | or                                    |                   |                        |
| City Tre     | nton  |                                       | State NJ          | Zip Code <u>08608</u>  |
| *(Area Co    | de) Telephone Number 609-695-5840           |                                       |                   |                        |
| 3. Name R    | obert Stewart                               |                                       |                   |                        |
| Registrati   | on Number 1479-2                            | Occupation or Business Legislativ     | /e Agent          |                        |
| Business /   | Address 142 West State Street, 2nd Flo      | or                                    |                   |                        |
| City Tren    | nton  |                                       | State NJ          | Zip Code 08608         |
| *(Area Co    | de) Telephone Number 609-695-5840           |                                       |                   |                        |
| 4. Name      |   |                                       |                   |                        |
| Registration | on Number                                   | Occupation or Business                |                   |                        |
| Business /   |   |                                       |                   |                        |
| City         |   |                                       | State             | Zip Code               |
| *(Area Co    | de) Telephone Number                        |                                       |                   |                        |
|              |   |                                       |                   |                        |
|              |   |                                       |                   |                        |

| 2. REPRESENTE<br>Provide the  | D ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL THEIR ACTIVITY following information concerning those Represented Entities who have designed. | ignate | ed t | his report to include their activity.  |
|---|---|--------|------|--|
| Note: For ea  | ch Represented Entity, Form L-2 must be filed.  |        |      |  |
| 1. Name of Rep  | resented Entity Avis Budget Group   |        |      |  |
| Business<br>Address   | 6 Sylvan Way  |        |      | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.        |
| City Parsippa   | ny :  | State  | רע   | Zip Code 07054   |
| Type of Busines   | s Car Rental  |        |      |  |
| 2. Name of Rep  | resented Entity Abbott Laboratories   |        |      | *******************************  |
| Business<br>Address   | 100 Abbott Park Rd.   |        |      | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.        |
| City Abbott P   | ark   | State  | IL   | Zip Code 60004   |
| Type of Business  | s Pharmaceuticals   |        |      |  |
| 3. Name of Repr   | resented Entity Epilepsy Foundation   |        |      | ***  |
| Business  | 1 AAA Drive   |        | П    | Check if communication with the general public ("Grassroots  |
| Address   | Suite 203   |        |      | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Trenton  | S   | tate   | NJ   | Zip Code <u>08691</u>  |
| Type of Business  | Healthcare  |        |      |  |
| 4. Name of Repr   | esented Entity Lenape Regional HIgh School District   |        |      |  |
| Business  | 93 Willow Grove Rd.   |        | П    | Check if communication with the general public ("Grassroots  |
| Address   | ***************************************   |        |      | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Shamong  | <u>1</u> S  | tate   | NJ   | Zip Code <u>08088</u>  |
| Type of Business  |   |        |      |  |
| 5. Name of Repr   | esented Entity Feld Entertainment   |        |      |  |
| Business<br>Address   | 8607 Westwood Center Drive  |        |      | Check if communication with the<br>general public ("Grassroots<br>Lobbying") was the <b>only</b> lobbyi<br>activity for this entity. |
| City Vienna   | S   | tate \ | VA   | Zip Code 22182   |
| Type of Business  | Entertainment   |        |      |  |
|   |   |        |      |  |
|   |   |        |      |  |
| Name In the State of the State | Enforcement Commission  |        |      |  |

|                     | D ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL THEIR ACTIVITY following information concerning those Represented Entities who have desi | ignate  | ed tl  | his report to include their activity.  |
|---------------------|--|---------|--------|--|
| Note: For ea        | ch Represented Entity, Form L-2 must be filed.   |         |        |  |
| 1. Name of Rep      | resented Entity L A Fitness  |         |        |  |
| Business<br>Address | P O Box 52110  |         |        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Irvine         |  | State   | CA     | •  |
| Type of Business    | Health   |         |        |  |
| 2. Name of Repr     | resented Entity Bowman & Co.   |         |        |  |
| Business<br>Address | 601 White Horse Rd   |         |        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Voorhees       | S S  | State   | NJ     | Zip Code 08043   |
| Type of Business    | Auditors & Accountants   |         |        |  |
| 3. Name of Repr     | esented Entity Clearwire Legacy LLC  | 1       |        |  |
| Business<br>Address | 593 Herndon Parkway  |         |        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Herndon        | S  | state \ | VA     | Zip Code <u>20170</u>  |
| Type of Business    | Internet Provider  |         |        |  |
| 4. Name of Repr     | esented Entity Jefferson Fifth   |         |        |  |
| Business            | 4959 Laurel Run  |         |        | Check if communication with the general public ("Grassroots  |
| Address             | ·  | [ˈ      |        | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Winston S      | Salem Si   | tate 1  | NC     | Zip Code 27106   |
| Type of Business    | Consultants  |         |        |  |
| 5. Name of Repre    | esented Entity Prison Health Services  |         |        | Charles for a service service and a service se |
| Business            | 105 Westpark Drive, Suite 200  | _       | $\neg$ | Check if communication with the general public ("Grassroots  |
| Address             |  | [       |        | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Brentwoo       | d Si   | tate ]  | ΓΝ     | Zip Code <u>37027</u>  |
| Type of Business    | Healthcare   |         |        |  |
|                     |  |         |        |  |
|                     |  |         |        |  |
|                     |  |         |        |  |

|                     | D ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL THEIR ACTIVITY following information concerning those Represented Entities who have desi | ignat         | ed ti  | his report to include their activity.  |
|---------------------|--|---------------|--------|--|
| Note: For ea        | ch Represented Entity, Form L-2 must be filed.   |               |        |  |
| 1. Name of Rep      | resented Entity Recreational Park Trailer Industry Assoc   |               |        |  |
| Business<br>Address | 30 Greenville St.  | _             |        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.          |
| City Newnan         | S  | State         | GA     | Zip Code 30263   |
| Type of Business    | Industry Association   | _             |        |  |
| 2. Name of Repr     | resented Entity 96 East Main LLC dba Jack Green Homes, Inc   |               |        |  |
| Business<br>Address | 2 East Midland Ave   |               |        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.          |
| City Kearny         | s  | state         | NJ     | Zip Code 07032   |
| Type of Business    | Developer  |               |        |  |
| 3. Name of Repr     | esented Entity Sprint Nextel   |               |        |  |
| Business<br>Address | 2001 Edmund Halley Drive   |               |        | Check if communication with the<br>general public ("Grassroots<br>Lobbying") was the <b>only</b> lobbying<br>activity for this entity. |
| City Reston         | S  | tate          | VA     | Zip Code 20191   |
| Type of Business    | Cellular Communications  |               |        |  |
| 4. Name of Repre    | esented Entity United Road Towing, Inc.  |               |        |  |
| Business            | 9550 Bormet Drive, Suite 301   |               | $\Box$ | Check if communication with the general public ("Grassroots  |
| Address             |  | [             |        | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Mokena         | St   | tate          | IL     | Zip Code 60448   |
| Type of Business    | Towing Recovery Contractor   |               |        |  |
| 5. Name of Repre    | esented Entity Waste Management  |               |        |  |
| Business            | 4 Liberty Lane West  | _             |        | Check if communication with the general public ("Grassroots  |
| Address             |  | [             |        | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Hampton        | St   | tate <u>l</u> | NH     | Zip Code <u>03842</u>  |
| Type of Business    | Solid Waste  |               |        |  |
|                     |  |               |        |  |
|                     |  |               |        |  |

|                     | D ENTITIES DESIGNATING THIS REPORT TO INCLUDE ALL following information concerning those Represented Ent |         | ed th    | nis report to include their activity.  |
|---------------------|--|---------|----------|--|
| Note: For ea        | ch Represented Entity, Form L-2 must be filed.   |         |          |  |
| 1. Name of Repr     | esented Entity Wheelabrator Technologies   |         | <u> </u> | Check if communication with the  |
| Business<br>Address | 4 Liberty Lane West  |         |          | general public ("Grassroots  Lobbying") was the <b>only</b> lobbying  activity for this entity.  |
| City West Har       | npton  | State   | NH       | Zip Code 03842   |
| Type of Business    | Waste to Energy Operator   |         |          |  |
| 2. Name of Repr     | esented Entity Worek, Inc.   |         |          |  |
| Business<br>Address | P O Box 4575   |         |          | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.          |
| City Trenton        |  | State   | ΝJ       | Zip Code <u>08611</u>  |
| Type of Business    | Sales  |         |          |  |
| 3. Name of Repr     | esented Entity   |         |          |  |
| Business<br>Address |  |         |          | Check if communication with the<br>general public ("Grassroots<br>Lobbying") was the <b>only</b> lobbying<br>activity for this entity. |
| City                |  | State   |          | Zip Code   |
| Type of Business    |  |         |          |  |
| 4. Name of Repre    | esented Entity   |         |          |  |
| Business<br>Address |  |         |          | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity.          |
| City                |  | State   |          | Zip Code   |
| Type of Business    |  |         |          |  |
| 5. Name of Repre    | sented Entity  |         |          |  |
| Business<br>Address |  |         | _        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbyingactivity for this entity.           |
| City                |  | State _ |          | Zip Code   |
| Type of Business    |  |         |          |  |
|                     |  |         |          |  |
|                     |  |         |          |  |
|                     |  |         |          |  |

|                     | RESENTED ENTITIES following information concerning other Represented Entites. |               |    |  |
|---------------------|---|---------------|----|--|
| 1. Name of Rep      | resented Entity Anheuser- Busch Companies                                     |               |    |  |
| Business<br>Address | 1404   Street, Suite 200  |               |    | Check if communication with the<br>general public ("Grassroots<br>Lobbying") was the <b>only</b> lobbying<br>activity for this entity. |
| City Washing        | ton   | State         | DC | Zip Code 20005   |
| Type of Business    | Brewer  |               |    |  |
| 2. Name of Repr     | esented Entity RAI Services (formerly Reynolds American)                      |               | _  |  |
| Business            | P O Box 2959  |               |    | Check if communication with the general public ("Grassroots  |
| Address             |   |               |    | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Winston-       | Salem   | state         | NC |  |
| Type of Business    | Tobacco   |               |    |  |
| 3. Name of Repr     | esented Entity Comcast Communications   |               |    |  |
| Business            | 1010 Stony Hill Rd  |               |    | Check if communication with the<br>general public ("Grassroots   |
| Address             |   |               |    | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City <u>Yardley</u> |   | tate          | PA | Zip Code 19067   |
| Type of Business    | Cable TV  |               |    |  |
| 4. Name of Repre    | esented Entity GlaxoSMithKline  |               |    |  |
| Dasiness            | 1800 Cook Farm Rd.  |               |    | Check if communication with the general public ("Grassroots  |
| Address             |   |               |    | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Montville      |   | tate          | NJ | Zip Code 07045   |
| Type of Business    | Pharmaceutical  |               |    |  |
| 5. Name of Repre    | esented Entity Exelon Corporation   |               |    |  |
| Business            | 200 Exelon Way  |               |    | Check if communication with the general public ("Grassroots  |
| Address             |   |               |    | Lobbying") was the <b>only</b> lobbying activity for this entity.  |
| City Kennett So     | quareSi   | tate <u>f</u> | PA | Zip Code 19348   |
| Type of Business    | Energy Provider   |               |    |  |
|                     |   |               |    |  |
|                     |   |               |    |  |

|                         | RESENTED ENTITIES following information concerning other Represented Entites. | -          |   |
|-------------------------|---|------------|---|
| 1. Name of Repre        | esented Entity Quest Diagnostics  |            |   |
| Business<br>Address     | 815 Connecticut Ave, NW, Suite 330  | - [        | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity. |
| City Washingt           | on Sta  | e D        | C Zip Code 20006  |
| Type of Business        |   |            |   |
| 2. Name of Repre        | esented Entity  |            |   |
| Business<br>Address     |   | -          | Lobbying / Was tric bing lobbying   |
| City                    | Stat  | -          | activity for this entity.  Zip Code   |
| Type of Business        |   |            |   |
|                         | sented Entity   |            |   |
| Business .<br>Address   |   | -          | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity. |
| City                    | Stat  | e          | Zip Code  |
| Type of Business        |   |            |   |
|                         | sented Entity   |            |   |
| Business _<br>Address _ |   |            | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity. |
| City                    | Stat  | <u>-</u> _ | Zip Code  |
| Type of Business        |   |            |   |
|                         | sented Entity   |            |   |
| Business _<br>Address _ |   |            | Check if communication with the general public ("Grassroots Lobbying") was the <b>only</b> lobbying activity for this entity. |
| City                    | State   |            | Zip Code  |
| Type of Business        |   |            |   |
|                         |   |            |   |

|   | SCHEDULE A  |
|---|---|
| 1. Did any Governmental Affairs Agent n   | amed in this Annual Report serve as a member of:  |
| ➤ any independent State authori   | ity;  |
| ➤ any county improvement auth   | ority;  |
| ➤ any municipal utilities authorit  | y;  |
| 1   | ority as a member from New Jersey; or,  |
| <ul> <li>any board or commission estable</li> <li>Legislature, or by any Agency,</li> </ul> | olished by statute or resolution, or by executive order of the Governor, or by the<br>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  | Aladar G. Komjathy  |
| Name of Authority, Board, or Commission   | Hunterdon County Board of Taxiation   |
| Date When Term of Service Expires   | May 1, 2011 - (Retired 7-01-10)   |
|   |   |
| Name of Governmental Affairs Agent  | Aladar G. Komjathy  |
| Name of Authority, Board, or Commission   | Lambertville Board of Fire Commissioners  |
| Date When Term of Service Expires   | March 1, 2012   |
|   |   |
| 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   |   |
|   |   |
|   |   |
|   |   |
| Did all Governmental Affairs Agent(s<br>required during the calendar year co                | s) named in this Annual Report file all Notices of Representation and Quarterly Reports overed 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  | AMC               | DUNT       |
|------------|---|-------------------|------------|
| Aladar G.  | Komjathy  | \$                | 235,200.00 |
| Eileen Kea | an  |                   | 97,250.00  |
| Robert A.  | Stewart   |                   | 59,451.49  |
|            | ·   | <u> </u>          |            |
|            |   |                   |            |
|            | ·   |                   |            |
|            |   |                   |            |
|            |   |                   |            |
|            | SCHEDULE B TOTAL \$   |                   | 391,901.49 |
|            |   |                   |            |
|            | SCHEDULE C - SUPPORT PERSONNEL  |                   |            |
| PURPOSE:   | To report the costs of support personnel who, over the course of the reporting year, individed hours supporting the activities of the Governmental Affairs Agent(s).  | ually spend 450 c | or more    |
|            | After determining to which person(s) this applies, report the pro rata share of those costs we supporting the activities of the Governmental Affairs Agent(s) in influencing legislation, regprocesses, or communicating with the general public. |                   |            |
|            |   |                   |            |

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  | \$<br>1,125.00  |
| Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet  | 3,301.46        |
| Postage  | 670.86          |
| Telephone, Telegram, Facsimile   | 9,904.38        |
| Pro Rata Overhead Costs of Specific Events Over \$100 (please identify name and date of event)  Other (please describe):   |                 |
| SCHEDULE F - TRAVEL/LODGING  |                 |
| <b>PURPOSE:</b> To report the travel and lodging costs of the Governmental Affairs Agents on whose behalf this reinfluencing legislation, regulations, governmental processes, or communicating with the general | led related to  |
| NAME OF GOVERNMENTAL AFFAIRS AGENT   | AMOUNT          |
| Aladar G. Komjathy   | \$<br>10,523.19 |
|  | 10,523.19       |
| Eileen Kean  |                 |

| SUMMARY | OF BENEFIT PASSING |
|---------|--------------------|
|         |                    |

| <b>PURPOSE:</b> To report the total amount of providing benefits to State officials covered by the Act and their imm | mediate 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

<sup>\*</sup> 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**

|                            | Total Lobbying Expenditures         | \$<br>457,949.57 |
|----------------------------|-------------------------------------|------------------|
| 5. Benefit Passing         | Schedule G-1 and Schedule G-2 Total | 0.00             |
| 4. Travel and Lodging      | Schedule F Total                    | 21,046.38        |
| 3. Communication Expenses  | Schedule E Total                    | 15,001.70        |
| 2. Support Personnel       | Schedule C Total                    | 30,000.00        |
| 1. Salary and Compensation | Schedule B Total                    | \$<br>391,901.49 |

#### **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. Abbott Laboratories                   | \$ 24,000.00 |
| 2. Anheuser-Busch Companies              | 96,488.00    |
| 3. Avis-Budget Group                     | 42,000.00    |
| 4. Jefferson Fifth                       | 4,250.00     |
| 5. Bowman & Co.                          | 27,500.00    |
| 6. Clearwire Legacy LLC                  | 30,000.00    |
| 7. Comcast Communications                | 61,481.94    |
| 8. Exelon Corporation                    | 74,495.28    |
| 9. Feld Entertainment                    | 20,000.00    |
| 10. GlaxoSmithKline                      | 60,488.00    |
| 11. LA Fitness                           | 24,000.00    |
| 12. Lenape Regional High School District | 11,880.80    |
| 13. Prison Health Services               | 26,488.00    |
| 14. Quest Diagnostics                    | 27,000.00    |
| 15. RAI, (formerly Reynolds American)    | 92,342.92    |
| 16. Sprint/Nextel                        | 65,385.20    |
| 17. United Road Towing, Inc.             | 45,000.00    |
| 18. Waste Management                     | 128,050.46   |

|                | 45,000.00  |
|----------------|------------|
|                | 128,050.46 |
|                |            |
| TOTAL RECEIPTS | \$<br>     |
|                |            |
|                |            |
|                |            |
|                |            |

#### **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     |  |
|--|---------------|------------|--|
| ı. Wheelabrator Technologies                   | \$            | 39,000.00  |  |
| 2. Worek Inc.                                  |               | 1,600.00   |  |
| B. Epilepsy Foundation                         |               | 0.00       |  |
| Recreational Park Trailer Industry Assoc       |               | 0.00       |  |
| 5. 96 E. Main LLC (dba Jack Green Homes, Inc.) |               | 2,000.00   |  |
| 5.   |               |            |  |
| 7  |               |            |  |
| 3.   |               |            |  |
| ).   |               |            |  |
| 0.   |               |            |  |
| 1.   |               |            |  |
| 2.   |               |            |  |
| 3.   |               |            |  |
| 4.   |               |            |  |
| 5.   |               |            |  |
| 6.   |               |            |  |
| 7.   |               |            |  |
| 8.   |               |            |  |
|  |               |            |  |
| TATAT  | . RECEIPTS \$ | 903,450.60 |  |

| <u> </u>  |      |
|---|------|
| CERTIFICATION   |      |
| This certification shall be signed by either the Governmental Affairs Agent filing th Managing or Principal Partner or Chief Executive Officer of the Governmental Affair   |      |
| I, ALADAR G. KOMJATHY   |      |
| (print name)  |      |
| hereby certify that I am duly authorized by   |      |
| KOMJATHY & STEWART, LLC   |      |
| (print name of firm)  |      |
| to file and certify the accuracy and correctness of this Annual Report of Lobbying A I certify that the statements made herein are true and accurate. I am aware that if a false, I may be subject to punishment. |      |
| Signature   | Date |
|   |      |