

ANNUAL REPORT OF

REPRESENTED ENTITY

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)

Reporting For Calendar Year 2009

ELEC RECEIVED MAR 0 5 2010

FOR STATE USE ONLY

			Amendment	
Name of Represented Entity Stony Brook-Millston	ne Watershed Association	on RECEIVE	C D	
Business Address 31 Titusmill Road		WA FA	, .,	
		em in	1	
City Pennington		State NJ .	Zip Code <u>08501</u>	
*(Area Code) Telephone Number (609) 737-3735				
1. Provide the following information regarding the Gov	ernmental Affairs Agent(s) e	employed by the Represe	inted Entity named abo	ve.
1. Name Jim Waltman				
Registration Number 1612-1	Job Title Executive D	irector		
Business Address 31 Titusmill Road				
Cky Pennington		State NJ	Zip Code <u>08501</u>	
"(Area Code) Telephone Number (609) 737-3735,	ext22		·	
2. Name Jennifer M. Coffey				
Registration Number 1612-2	Job Title Policy Direct	tor		
Business Address 31 Titusmill Road				
City Pennington		State NJ	Zip Code <u>08501</u>	
*(Area Code) Telephone Number (609) 737-3735,	ext 18			
3. Name				
Registration Number	_ Job Title			
Business Address				
City		State	Zip Code	
*(Area Code) Telephone Number		_		
4. Name				
Registration Number	Job Title			
Business Address				
City		State	_ Zip Code	
*(Area Code) Telephone Number				

 Provide the following information rega- Entity. 			
1. Name of Agent or Firm			
Business			
			Zip Code
*(Area Code) Telephone Number			
2. Name of Agent or Firm			
Business Address			
City		State	Zip Code
*(Area Code) Telephone Number	Occupation/B	Business	· · ·
	SCHEDULE A		•
Did any Governmental Affairs Agent nar any independent State authority	ned on page 1, question 1, serve as a mem	nber of:	
> any county improvement author			
any municipal utilities authority;			
•	rity as a member from New Jersey; or,		
	shed by statute or resolution, or by execut epartment or other instrumentality of the S		ernor, or by the
☐ No If "no," continue on to the	next question. Yes If "yes," plea	ase provide the follow	ving information:
Name of Governmental Affairs Agent	Jim Waltman	<u> </u>	
Name of Authority, Board, or Commission	State Agricultural Development Co	ommittee	
Date When Term of Service Expires	01/31/2011		
Name of Governmental Affairs Agent	Jennifer M. Coffey		
Name of Authority, Board, or Commission	Upper Freehold Township Environ	mental Advisory	Committee
Date When Term of Service Expires	12/31/2012		
Name of Governmental Affairs Agent			
larne of Authority, Board, or Commission			
Date When Term of Service Expires			
lame of Governmental Affairs Agent			
lame of Authority, Board, or Commission			
Date When Term of Service Expires			
Did the Governmental Affairs Agent(s) na during the calendar year covered by this	med on page 1, question 1 file all Notices of Annual Report?	of Representation an	d Quarterly Reports required
Yes If "yes," continue on to Sc	hedule 8.	ease file the necessar	v reports immediately
•			y reports minimediately.

SCHEDULE B - SALARY & COMPENSATION

PURPOSE: To report the salary and compensation paid by the Represented Entity to its Governmental Affairs Agent(s). Include the reimbursement of an Agent's expenses in amounts reported.

> 1. For the Governmental Affairs Agents who are employees of the Represented Entity named on page 1, question 1, please report the salary and other compensation paid. MOTE: Only the pro rata share of each employee's salary and compensation need be included if the employee spends only a portion of his/her time lobbying.

> > 15,145.00

2. For the Governmental Affairs Agents named on page 2, question 2, who are retained or otherwise engaged by the Represented Entity, please provide the following information:

NAME OF PAYEE	LOBBYING PURPOSE	COMPENSATION
In house governmental affairs agents	Lobbying and grassroots support of various clean water and healthy habitat legislation	\$. 15,145.00
2.		
3.		
4.		
5. ,		
6.		
7.	·	
	Total \$	15,145.00
	SCHEDULE B TOTAL \$	15,145.00

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 Represented Entity or 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 Represented Entity or Governmental Affairs Agent(s) in influencing legislation, regulations, governmental processes, or communicating with the general public.

SCHEDULE CTOTAL \$	•
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SCHEDULES D-1 & D-2 - ASSESSMENTS, MEMBERSHIP FEES, OR DUES

Schedule D-1 - Specific Intent

PURPOSE: To report the amount of assessments, membership fees, or dues <u>paid by the Represented Entity</u>. If the assessments, membership fees, or dues were <u>paid by the Represented Entity</u> with the specific intent to influence legislation, regulations, governmental

processes, or to communicate with the general public, please provide the information below:

PART I - For assessments, membership fees, or dues exceeding \$100 for the calendar year:

PART II – For assessments, membership fees, or dues \$100 or less for the calendar year: Part I TOTAL \$ (Part I AND Part II) Schedule D-1 TOTAL \$ Schedule D-2 - Major Purpose PURPOSE: To report the pro rata amount of assessments, membership fees, or dues paid by the Represented Entity membership fees, or dues were paid by the Represented Entity regulations, governmental processes, or to communicate with the general public, and, was not reported on Sc intent. Please provide the information below: PART II – For assessments, membership fees, or dues exceeding \$100 for the calendar year: DATE PAYEE DESCRIPTION (A,M, or D) \$	AMOUNT	DESCRIPTION (A,M, or D)	PAYEE	DATE
PART II – For assessments, membership fees, or dues \$100 or less for the calendar year: [Part I AND Part II) Schedule D-1 TOTAL \$ [Part I AND Part II) Schedule D-1 TOTAL \$ [Part I AND Part II) Schedule D-1 TOTAL \$ [Part I AND Part II) Schedule D-1 TOTAL \$ [Part I AND Part II) Schedule D-1 TOTAL \$ [Part II Total	1,000.00	D	Keep It Green	
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ART II – For assessments, membership fees, or dues \$100 or less for the calendar year: (Part I AND Part II) Schedule D-1 TOTAL \$ (Part I AND Part II) Schedule D-1 TOTAL \$ (Part I AND Part II) Schedule D-1 TOTAL \$ (Chedule D-2 - Major Purpose URPOSE: To report the pro rata amount of assessments, membership fees, or dues paid by the Represented Entity membership fees, or dues were paid by the Represented Entity to an entity whose major purpose is to regulations, governmental processes, or to communicate with the general public, and, was not reported on Scintent," please provide the information below: ART I – For assessments, membership fees, or dues exceeding \$100 for the calendar year: DESCRIPTION (A,M, or D) \$				
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URPOSE: To report the pro rata amount of assessments, membership fees, or dues <u>paid by the Represented Entity</u> membership fees, or dues were <u>paid by the Represented Entity</u> to an entity whose major purpose is to regulations, governmental processes, or to communicate with the general public, and, was not reported on Sc Intent," please provide the information below: ART I – For assessments, membership fees, or dues exceeding \$100 for the calendar year: DESCRIPTION (A,M, or D) \$				
	o Influence legislation,	ntity whose major purpose is public, and, was not reported on	riship fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below:	memb regulat intent,
	o Influence legislation,	ntity whose major purpose is public, and, was not reported on DESCRIPTION	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar ye	memb regulat Intent, ART I – For assessmi
	o Influence legislation, Schedule D-1, "Specific	DESCRIPTION (A,M, or D)	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar ye	memb regulat Intent; ARCT I – For assessmi
	o Influence legislation, Schedule D-1, "Specific	DESCRIPTION (A,M, or D)	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar ye	memb regulat Intent, ART I – For assessmi
	o Influence legislation, Schedule D-1, "Specific	DESCRIPTION (A,M, or D)	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar ye	memb regulat Intent, ART I – For assessmi
Part I TOTAL \$	o Influence legislation, Schedule D-1, "Specific	DESCRIPTION (A,M, or D)	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar ye	memb regulat Intent; ART I – For assessmi
WRT III — For assessments, membership fees, or dues \$100 or less for the calendar year: Part II TOTAL \$	o Influence legislation, Schedule D-1, "Specific AMOUNT	DESCRIPTION (A,M, or D)	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar ye	memb regulat Intent, ART I – For assessmi
(Part I and Part II) Schedule D-2 TOTAL \$	o Influence legislation, Schedule D-1, "Specific AMOUNT	DESCRIPTION (A,M, or D) Part I TOTAL \$	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar years. PAYEE	membregulai Intent, ART I – For assessmi
Schedule D-1 AND Schedule D-2 TOTAL \$	o Influence legislation, Schedule D-1, "Specific AMOUNT	DESCRIPTION (A,M, or D) Part I TOTAL \$ Part II TOTAL \$	ership fees, or dues were <u>paid by the Represented Entity</u> to an ions, governmental processes, or to communicate with the general please provide the information below: ents, membership fees, or dues exceeding \$100 for the calendar year. PAYEE ents, membership fees, or dues \$100 or less for the calendar year:	membregulai Intent, ART I – For assessmi

SCHEDULE E - COMMUNICATION EXPENSE: PURPOSE: To report the costs of the preparation and distribution of materials related to influgovernmental processes, and conducting communications with the general pub	iencing legislation, regulations,
EXPENSE	AMOUNT
Printed Materials	s 500.00
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 (please identify name and date of event)	
	<u> </u>
Other (please describe)	
SCHED	JLE E TOTAL \$
SCHEDULE F - TRAVEL/LODGING PURPOSE: To report the travel and lodging costs of the Governmental Affairs Agents who a named on page 1, question 1, related to influencing legislation, regulations, gove with the general public.	
NAME OF GOVERNMENTAL AFFAIRS AGENT	AMOUNT
Jim Waltman	\$ 357.00
Jennifer M. Coffey	500.00
SCHED	LEFTOTAL\$ 857.00

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 \$ _	
lame and Address of Payer	e/Vendor			
Address				
City			Zip Code	
	olease report the date, the descripti Amount \$		t of the reimbursement.	
Description				
ame of Benefit Recipient				
Date	Description		Amount \$	
lame and Address of Payer	e/Vendor			٠
Address				
City			Zip Code	
	olease report the date, the descripti Amount \$		of the reimbursement.	
Description				
ame of Benefit Recipient				
			Amount \$	
Date	Description		Amount \$	
Date Name and Address of Payee Name	Description		Amount \$	
Date Jame and Address of Payee Name Address	Description		Amount \$	
Name and Address of Payee Name Address City I benefit was reimbursed, p	Description	State	Amount \$Zip Code	
Date Iame and Address of Payee Name Address Dity benefit was reimbursed, p Date	Description	State	Amount \$Zip Code	
lame and Address of Payee Name Address City benefit was reimbursed, poste Description	Description	State	Amount \$Zip Code	
Date	Description	State	Amount \$Zip Code	
Name and Address of Payee Name Address City I benefit was reimbursed, poate Description Dame of Benefit Recipient Date	Description E/Vendor Elease report the date, the description Déscription	State	Zip Code of the reimbursement.	
Date	Description E/Vendor Elease report the date, the description Déscription	State	Zip Code of the reimbursement.	
Date	Description E/Vendor Elease report the date, the description Déscription	State on, and the amount	Zip Code of the reimbursement.	
Date	Description Pelease report the date, the description Amount S Description Vendor	State on, and the amount	Zip Code Amount \$ Zip Code Amount \$	

SUMMARY OF BENEFIT PASSING

PURPOSE: To repo	ort the total amount of providing	benefits to State off	icials covered b	y the Act and their im	mediaté family members.
		SCHEDULE G-1*	SCI	HEDULE G-2**	AMOUNT
Entertainment	•		+\$	==	S
Food and Beverage	•			=	
_	-			=	
Travel	-				
Lodging	-		_ +	=	
Honoraria	-		_ +	=	
Loans	-	•	_ +	=	
Gifts	_		+	=	
Other(specify)			_ +	=	
Total	\$_		_ +\$	=	\$ <u> </u>
					SCHEDULE G-1 AND SCHEDULE G-2 TOTAL
ENTER THE TOTAL	y, the value of benefit passing when the value of benefit passing when the value of REIMBURSED BENEFIT PARTIES AMOUNT FROM PARTIES AMOUNT FROM PARTIES AMOUNT FROM PARTIES AMOUNT FROM PARTIES AMOUNT	EFITS, IF ANY.			Vcalendar year thresholds.
	SUMMAR	Y OF LOBBYING	EXPENDITU		
EXPENDITURES					
	1. Salary and Compensation (Ad	dd the total from que	estions 1 & 2)	Schedule B Total \$	15,145.00
	2. Support Personnel			Schedule C Tota	0.00
	3. Assessments, Membership Fe	es, or Dues	Schedule D-1 ar	nd Schedule D-2 Total	0.00
	4. Communication Expenses			Schedule E Total	500.00
	5. Travel and Lodging			Schedule F Total	857.00
	6. Benefit Passing	:	Schedule G-1 ar	nd Schedule G-2 Total	0.00
			Total Lobby	ring Expenditures \$	16,502.00

RECEIPTS TABLES 1 AND 2

Receipts Table 1 - Specific Intent

PURPOSE: To report the amount of contributions, loans, membership fees, dues, or assessments <u>received by the Represented Entity</u>.

If the contributions, loans, membership fees, dues, or assessments were received by the Represented Entity with the specific intent to

DATE	SOURCE	or assessments exceeding \$100 for the calendar year: ADDRESS	AMOUN
DAIL	Jource		
			\$
			-
[
	•		
		Part I Total	\$
	itions, loans, membership fees, dues,	or assessments \$100 or Part II Total	s
for the calendar y	/ear:	Receipts Table 1 Total (Part I and II) :	\$
POSE: To report t y. Note: If a recei ior Purpose" recei	the pro rata amount of contributions, pt was already reported on Receipts T pt. If the receipts were received by the	loans, membership fees, dues, or assessments <u>received l</u> able 1 as a "Specific Intent" receipt, DO NOT report again e Represented Entity whose major purpose is to influence ith the general public, please provide the information be	as a e legislation,
IPOSE: To report t ty. Note: If a recei jor Purpose" recei ilations, governme	the pro rata amount of contributions, pt was already reported on Receipts T pt. If the receipts were received by the ental processes, or to communicate w	able 1 as a "Specific Intent" receipt, DO NOT report again e Represented Entity whose major purpose is to influence	as a e legislation,
tPOSE: To report to the ty. Note: If a receipt por Purpose receipt attions, governmented the percentage arch receipt, multipose.	the pro rata amount of contributions, pt was already reported on Receipts T pt. If the receipts were received by the ental processes, or to communicate w ge of activity which constituted lobby iply the percentage indicated by the a	able 1 as a "Specific Intent" receipt, DO NOT report again Represented Entity whose major purpose is to influence ith the general public, please provide the information be ing (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount.	as a e legislation,
tPOSE: To report to the ty. Note: If a receipt por Purpose receipt attions, governmented the percentage arch receipt, multipose.	the pro rata amount of contributions, pt was already reported on Receipts T pt. If the receipts were received by the ental processes, or to communicate were of activity which constituted lobby	able 1 as a "Specific Intent" receipt, DO NOT report again Represented Entity whose major purpose is to influence ith the general public, please provide the information be ing (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount.	as a e legislation,
iPOSE: To report to the transport of the	the pro rata amount of contributions, pt was already reported on Receipts T pt. If the receipts were received by the ental processes, or to communicate w ge of activity which constituted lobby iply the percentage indicated by the a	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence with the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount. gate total. Receipts Table 2 Total \$	as a e legislation,
POSE: To report to the post of the percentage of	the pro rata amount of contributions, pt was already reported on Receipts T pt. If the receipts were received by the ental processes, or to communicate were of activity which constituted lobby the percentage indicated by the acceipt amounts to arrive at the aggregation.	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence with the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount. gate total. Receipts Table 2 Total \$	as a e legislation,
POSE: To report to the post of the percentage of	the pro rata amount of contributions, pt was already reported on Receipts Tpt. If the receipts were received by the ental processes, or to communicate wage of activity which constituted lobby iply the percentage indicated by the acceipt amounts to arrive at the aggregate amount. Any net receipt in excess of	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence ith the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount, pate total. Receipts Table 2 Total \$ of \$100 should be listed below:	as a e legislation, elow:
POSE: To report to y. Note: If a receipt receipt lations, governmented the percentage arch receipt, multitogether all net receipt rece	the pro rata amount of contributions, pt was already reported on Receipts Tpt. If the receipts were received by the ental processes, or to communicate wage of activity which constituted lobby iply the percentage indicated by the acceipt amounts to arrive at the aggregate amount. Any net receipt in excess of	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence ith the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount, pate total. Receipts Table 2 Total \$ of \$100 should be listed below:	as a e legislation, elow:
POSE: To report to the percentage of the percent	the pro rata amount of contributions, pt was already reported on Receipts Tpt. If the receipts were received by the ental processes, or to communicate wage of activity which constituted lobby iply the percentage indicated by the acceipt amounts to arrive at the aggregate amount. Any net receipt in excess of	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence ith the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount, pate total. Receipts Table 2 Total \$ of \$100 should be listed below:	as a e legislation, elow:
POSE: To report to the percentage of the percent	the pro rata amount of contributions, pt was already reported on Receipts Tpt. If the receipts were received by the ental processes, or to communicate wage of activity which constituted lobby iply the percentage indicated by the acceipt amounts to arrive at the aggregate amount. Any net receipt in excess of	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence ith the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount, pate total. Receipts Table 2 Total \$ of \$100 should be listed below:	as a e legislation, elow:
POSE: To report to the properties of the percentage of the percent	the pro rata amount of contributions, pt was already reported on Receipts Tpt. If the receipts were received by the ental processes, or to communicate wage of activity which constituted lobby iply the percentage indicated by the acceipt amounts to arrive at the aggregate amount. Any net receipt in excess of	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence ith the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount, pate total. Receipts Table 2 Total \$ of \$100 should be listed below:	as a e legislation, elow:
ty. Note: If a receip jor Purpose" receipulations, government vide the percentage each receipt, multi together all net re iew each net recei	the pro rata amount of contributions, pt was already reported on Receipts Tpt. If the receipts were received by the ental processes, or to communicate wage of activity which constituted lobby iply the percentage indicated by the acceipt amounts to arrive at the aggregate amount. Any net receipt in excess of	able 1 as a "Specific Intent" receipt, DO NOT report against Represented Entity whose major purpose is to influence ith the general public, please provide the information being (this figure must be more than 50%): amount of the receipt to arrive at a net receipt amount, pate total. Receipts Table 2 Total \$ of \$100 should be listed below:	as a e legislation, elow:

CERTIFICATION

This certification shall be signed by a Governmental Affairs Agent employed by the Represented Entity or a responsible Financial or Governmental Affairs Officer of the Represented Entity.

Jennifer M. Coffey

hereby certify that I am duly authorized by

Stony Brook-Millstone Watershed Association

(print name of Represented Entity)

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.

Report amended as requested for Completeners. Jungs M. Comp