

## **DESIGNATION OF GOVERNMENTAL AFFAIRS AGENT**

## FORM L-2 Reporting For Calendar Year 2009

**ELEC RECEIVED** FEB 1 6 2010

FOR STATE USE ONLY

## **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 Represented Entity CORRECTIONAL DENTAL ASSOCIATES	
Name of Represented Entity CORRECTIONAL DEIVIAL ASSOCIAT	LJ
Business Address 192 WEST STATE STREET	
City TRENTON	State NJ Zip Code 08608
*(Area Code) Telephone Number	
The above named Represented Entity hereby designates the following Governmental Affairs Agent, or Governmental Affairs Agent Firm, employed or otherwise engaged by the Represented Entity, to file on its behalf the Annual Report of Lobbying Activity covering calendar year 2009 with the Election Law Enforcement Commission.	
Name of Governmental Affairs Agent or Governmental Affairs Agent Firm CAPITAL IMPACT GROUP	
Business Address 134 WEST STATE STREET	
City TRENTON	State NJ Zip Code 08608
This designation further represents a statement by the Represented Entity that the only reportable expenditures made by the Represented Entity were to the Governmental Affairs Agent or Governmental Affairs Agent Firm herein designated.	
It is understood that any violation of the Act, N.J.S.A. 52:13C-18 et seq. or the regulations promulgated thereunder, shall subject both the Represented Entity and designated Governmental Affairs Agent or Governmental Affairs Agent Firm to the penalties provided by law.	
Acknowledged:	
CAPITAL IMPACT GROUP	Correctional Dental Associates
Name of Governmental Affairs Agent or Governmental Affairs Agent Firm	Print Full Name of Represented Entity
	Leslie A. Hayling, Jr., D.D.S.
Print Full Mame	Print Full Name/Title
Signature	Signature
2/16/10	1/26/2010
Date	Date

New Jersey Election Law Enforcement Commission
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\*Loave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:11-1.1, an unlisted telephone number is not a public record and must not be provided on this form.