NY STATE LOBBYIST BI-MONTHLY REPORT

Marking Instructions: Please type or use blue or black ink pen.

Completely fill in one circle.

COMPLETE ALL SECTIONS

Print legible numbers and block letters, no script.	before submitting or form will be returned.
Reporting Information	FOR OFFICE USE ONLY
Year:	
Fill in circle if amendment O	
Report Period: O Jan/Feb O March/April O May/J	une
○ July/August ○ Sept/Oct ○ Nov/D	Dec Dec
Type of Lobbying: O Nonprocurement O Procurement	OBoth
Level of Gov't: O State Lobbying OLocal Lobbying	OBoth
Principal Lobbyist Information	
PRINCIPAL LOBBYIST NAME: Organization:	
or Last Name:	First Name:
Permanent Business Address:	
City:	State: ZIP code:
Business Phone:	Fax Number:
Additional Lobbyists List each individual associated with the principal lobbyist who lobbyour Statement of Registration, or in an amendment, mark the "ADLAST NAME: 1. 2. 3. 4. 5. 6. 7. 8. Continued on attached pages	ied during this period. If you list a name not shown on Section III of D" response beside the name. FIRST NAME: ADD O O O O O O O O O O O O
IV Client Information	
Name:	
Permanent Business Address:	
City:	State: ZIP code:
Business Phone:	Fax Number:
Third Party Beneficiary (see instructions):	
V Commonweat Commonweation and Daimbone	

V Summary of Compensation and Reimbursed Expenses for this period COMPENSATION (Current Period Only): \$.00 REIMBURSED EXPENSES (Current Period Only): \$.00

A Report in the aggregate all expenses loss than or equal to \$75. \$.00 Bill Report in the aggregate all expenses tor salaries of non-lobbying employees: \$.00 Cilientize exich expense exceeding \$75: PAID TO: DATE: / / Ad	VIII II I I I I I I I I I I I I I I I I			
B Report in the aggregate all expenses for salaries of non-lobbying employees: C Itemize each expense exceeding \$75: PAID TO: DATE: / / Ad	VI Lobbying Expenses (Current Per	riod Only)		
C itembre each expense exceeding \$75: PAID TO: DATE: / / Ad	A Report in the aggregate all expenses less than	n or equal to \$75: \$.00	
PAID TO: DATE:	B Report in the aggregate all expenses for sala	ries of non-lobbying employees:	\$.00
PURPOSE: PAID TO: PURPOSE: AMOUNT: \$.00 O *Addendum attrached PAID TO: PURPOSE: AMOUNT: \$.00 O *Addendum attrached PAID TO: PURPOSE: AMOUNT: \$.00 O *Addendum attrached PAID TO: PURPOSE: AMOUNT: \$.00 O *Addendum attrached PAID TO: PURPOSE: AMOUNT: \$.00 O *Addendum attrached PAID TO: PURPOSE: AMOUNT: \$.00 O *Addendum attrached O Continued on attrached pages If any expense listed above exceeds \$75 for an individual, you must strach the addendum page listing the expense, dollar amount attrached above exceeds \$75 for an individual, you must strach the addendum page listing the expense. O Continued attrached pages VII Subjects on which you lobbied: VII Subjects on which you lobbied: VII Subjects on which you lobbied: VIII Subject Matter of Recultive Order of Sovernor/Municipality on which you lobbied: C Continued on attrached pages XI Bull Rule, Regulation or Rate Numbers on which you lobbied: C Continued on attrached pages XI Subject Matter of and Tibes involved in tribal-state Compacts, etc on which you lobbied: C Continued on attrached pages XIII Declaration This Declaration must be signed by the principal lobbyst. If the principal lobbyst is an organization, the Chief Administrative Officer of such organization must sign his Declaration. (See instructions.) I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief. PAIE: PRINT NAME: LAST PRINT NAME: LAST FIRST	C Itemize each expense exceeding \$75:			
PAID TO: DATE: / / O Ad O Social Event PURPOSE: AMOUNT: \$.00 O *Addendum attached PAID TO: DATE: / / O Ad O Social Event PURPOSE: AMOUNT: \$.00 O *Addendum attached PURPOSE: AMOUNT: \$.00 O *Addendum attached O Continued on attached pages If any expense listed above exceeds \$75 for an individual, you must attach the addendum page listing the expense, doller amount attributable to the individual and the name, title and employer of the Individual. D Total expenses for current period: S .00 (# applicable, include all expenses from attached pages in total) VII Subjects on which you lobbled: VIII Subjects on which you lobbled: VIII Person: State Agency, Municipality or Legislative O Continued on attached pages X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts/documents on which you lobbled: X illie and identifying Numbers of procurement contracts of any include on attached pages X illies and identifying Numbers of procurement contracts on which you lobbled: X illies and identifying Numbers of procurement contracts on which you lobbled: X illies and identifying Numbers of procurement contracts on which you lobbled: X illies and identifying Numbers of procurement contracts on which you lobbled: X illies and identifying Numbers of procurement contracts on which you lobbled: X illies and identifying Numbers of procurement contracts on which you lobbled: X illies and identif	PAID TO:	DATE: / /		
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X SIGNATURE: DATE: PRINT NAME: LAST FIRST				
PRINT NAME: LAST FIRST	correct, and complete to the best of my knowledge and belief.			
PRINT NAME: LAST FIRST	X SIGNATURE:	DATE:		
	^			
Mark One: O Principal Lobbyist O Chief Administrative Officer O Designee(Attach Letter)	PRINT NAME: LAST	FIRST		
	Mark One: O Principal Lobbyist	O Chief Administrative Office	er	O Designee(Attach Letter)

Designated Addendum sheet for sections III and VI.

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

III Additional Lobbyists					
List each individual associated with the principal lobbyist who lobbyour Statement of Registration, or in an amendment, mark the "Al	pied during this period. If you list a name not shown on Sectio DD" response beside the name.	n III of			
LAST NAME:	FIRST NAME:	ADD			
1.		0			
2.		0			
3.		0			
4.		0			
5.		0			
6.		0			
7.		0			

VI Lobbying Expenses (Current Period Only)			
PAID TO:	DATE: /	/	O Ad O Social Event
PURPOSE:	AMOUNT: \$.00	*Addendum attached
PAID TO:	DATE: /	/	O Ad O Social Event
PURPOSE:	AMOUNT: \$.00	○ *Addendum attached
PAID TO:	DATE: /	/	O Ad O Social Event
PURPOSE:	AMOUNT: \$.00	*Addendum attached
PAID TO:	DATE: /	/	O Ad O Social Event
PURPOSE:	AMOUNT: \$.00	○ *Addendum attached

VI * Itemized Expenses		
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	

Designated Addendum sheet for sections V	
Please use the following addendum pages as continuation for the make a copy of this sheet.	he specified sections. If additional space is needed, please
VII Subjects on which you lobbied:	VIII Person, State Agency, Municipality or Legislative Body lobbied:
Pill Dula Dogulation or Data Numbers on which you	Title and Identifying Numbers of procurement
IX Bill, Rule, Regulation or Rate Numbers on which you lobbied:	X Title and Identifying Numbers of procurement contracts/documents on which you lobbied:
Number or Subject Matter of Executive Order of Governor/Municipality on which you lobbied:	XII Subject Matter of and Tribes involved in tribal-state compacts, etc on which you lobbied:
Governor/Municipality on which you lobbied:	compacts, etc on which you lobbied: