

DUPLICATE

**FORM L1-A**  
**Reporting For Calendar Year 2009**

**ELEC RECEIVED**  
**FEB 16 2010**

FOR STATE USE ONLY

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 Governmental Affairs Agent or Governmental Affairs Agent Firm:  
Tonio Burgos & Associates of New Jersey, LLC

Business Address 200 West State Street

City Trenton State NJ Zip Code 08608

\*(Area Code) Telephone Number 609/278-2630

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

1. Name Tonio Burgos

Registration Number 1284-1 Occupation or Business Government Affairs

Business Address 200 West State Street

City Trenton State NJ Zip Code 08608

\*(Area Code) Telephone Number 609/278-2630

2. Name Joseph Fiordaliso, Jr.

Registration Number 1284-3 Occupation or Business Government Affairs

Business Address 200 West State Street

City Trenton State NJ Zip Code 08608

\*(Area Code) Telephone Number 609/278-2630

3. Name Matthew Greller

Registration Number 1284-4 Occupation or Business Government Affairs

Business Address 200 West State Street

City Trenton State NJ Zip Code 08608

\*(Area Code) Telephone Number 609/278-2630

4. Name \_\_\_\_\_

Registration Number \_\_\_\_\_ Occupation or Business \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\*(Area Code) Telephone Number \_\_\_\_\_

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 American Airlines

Business Address 4333 Amon Carter Boulevard

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

City Fort Worth State TX Zip Code 76155

Type of Business Airline

2. Name of Represented Entity Coventry

Business Address 7111 Valley Green Road

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

City Fort Washington State PA Zip Code 19034

Type of Business Secondary life insurance

3. Name of Represented Entity Committee on Interns and Residents/SEIU

Business Address 520 Eighth Avenue  
Suite 1200

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

City New York State NY Zip Code 10018

Type of Business Health care union

4. Name of Represented Entity Greater New York Hospital Association

Business Address 555 West 57th Street  
Suite 1500

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

City New York State NY Zip Code 10019

Type of Business Hospital advocacy organization

5. Name of Represented Entity RC Cape May Holdings, LLC

Business Address 24 Waterway Avenue  
Suite 800

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

City Woodlands State TX Zip Code 77380

Type of Business Investment company

**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** Univision Communications, Inc.

Business Address 101 Constitution Avenue, NW  
Suite 350

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

City Washington State DC Zip Code 20001

Type of Business Spanish Language Multi-Media Company

**2. Name of Represented Entity** RJ Lee Group, Inc.

Business Address 350 Hochberg Road

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

City Monroeville State PA Zip Code 15217

Type of Business Scientific Analysis and Consulting

**3. Name of Represented Entity** HF Management Services, LLC

Business Address 25 Broadway  
9th Floor

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

City New York State NY Zip Code 10004

Type of Business Not for Profit Health Maintenance Organization

**4. Name of Represented Entity** K-12, Inc.

Business Address 2300 Corporate Park Drive  
Suite 200

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

City Herndon State VA Zip Code 20171

Type of Business On-line School Curriculum

**5. Name of Represented Entity** Change to Win

Business Address 1900 L Street, NW  
Suite 900

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

City Washington State DC Zip Code 20036

Type of Business Labor Union

**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 Shushana

Business Address 49 Walker Street  
Suite 3

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

City New York State NY Zip Code 10003

Type of Business Real Estate

2. Name of Represented Entity Mount Construction

Business Address 427 South White Horse Pike

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

City Berlin State NJ Zip Code 08009

Type of Business Construction

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 \_\_\_\_\_

**2a. OTHER REPRESENTED ENTITIES**

Provide the following information concerning other Represented Entities.

1. Name of Represented Entity Federal Express, Inc.

Business Address 1 Century Drive

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

City Parsippany State NJ Zip Code 07054

Type of Business Shipping and Logistics Management

2. Name of Represented Entity T-Mobile USA, Inc.

Business Address 4 Sylvan Way

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

City Parsippany State NJ Zip Code 07054

Type of Business Communications

3. Name of Represented Entity American International Group, Inc.

Business Address 70 Pine Street  
6th Floor

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

City New York State NY Zip Code 10270

Type of Business Insurance

4. Name of Represented Entity Verizon Communications, Inc.

Business Address 540 Broad Street  
Floor 20

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

City Newark State NY Zip Code 07102

Type of Business Communications

5. Name of Represented Entity Earle Companies

Business Address P.O. Drawer 556

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

City Farmingdale State NJ Zip Code 07727

Type of Business Construction

**2a. OTHER REPRESENTED ENTITIES**

Provide the following information concerning other Represented Entities.

1. Name of Represented Entity Medco

Business Address 100 Parsons Pond Drive

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

City Franklin Lakes State NJ Zip Code 07417

Type of Business Pharmacy Benefit Management

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**

NAME OF GOVERNMENTAL AFFAIRS AGENT	AMOUNT
Tonio Burgos	\$ 51,486.06
Joseph Fiordaliso, Jr.	87,043.05
Matthew Greller	86,690.12

**SCHEDULE B TOTAL \$** 225,219.23

### 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	\$ 420.00
Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet	1,367.75
Postage	0.00
Telephone, Telegram, Facsimile	7,989.31
Pro Rata Overhead Costs of Specific Events Over \$100 (please identify name and date of event)	
New Jersey Alliance for Action - 6th Annual Governor's Transportation Conference 3/2/09	10,000.00
New Jersey Alliance for Action - Economic Stimulus Conference - 4/2/09	180.00
New Jersey Alliance for Action - Utilities Conference - 6/2/09	190.00
New Jersey Alliance for Action - South Jersey Dinner - 6/17/09	125.00
New Jersey Alliance for Action - Eagle Awards - 10/14/09	7,500.00
New Jersey Chamber of Commerce - Complete Breakfast Series - 3/20, 4/29, 5/20, 6/9	580.00
New Jersey Business and Industry Association - Meet the Governor's Staff - 2/27/09	2,500.00
Other (please describe):	
New Jersey Alliance for Action events, 3/20, 7/31, 11/15	285.00
New Jersey Chamber of Commerce events, 4/3, 4/17	120.00
New Jersey Business and Industry Association events, 9/1, 10/17, 4/28, 5/6, 10/22	363.00
<b>SCHEDULE E TOTAL \$</b>	<b>32,178.06</b>

### 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
Tonio Burgos	\$ 217.23
Joseph Fiordaliso, Jr.	1,852.05
Matthew Greller	1,414.87
<b>SCHEDULE F TOTAL \$</b>	<b>3,484.15</b>

**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	\$ 0.00
Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet	0.00
Postage	0.00
Telephone, Telegram, Facsimile	0.00
Pro Rata Overhead Costs of Specific Events Over \$100 (please identify name and date of event)	0.00
New Jersey Business and Industry Association - Meet the Decision Makers Series - 4/14, 10/9	300.00
New Jersey Business and Industry Association - State Environmental Regulations - 5/15	129.00
New Jersey Business and Industry Association - Paid Family Leave	129.00
Other (please describe):	
n/a	0.00
<b>SCHEDULE E TOTAL \$</b>	
	<b>32,178.06</b>

**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
n/a	\$ 0.00
<b>SCHEDULE F TOTAL \$</b>	
	<b>3,484.15</b>

**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 n/a  
 Date \_\_\_\_\_ Description \_\_\_\_\_ Amount \$ 0.00

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	\$ 0.00		\$ 0.00		\$ 0.00
Food and Beverage	0.00		0.00		0.00
Travel	0.00		0.00		0.00
Lodging	0.00		0.00		0.00
Honoraria	0.00		0.00		0.00
Loans	0.00		0.00		0.00
Gifts	0.00		0.00		0.00
Other (specify) _____	0.00		0.00		0.00
<b>Total</b>	<b>\$ 0.00</b>		<b>\$ 0.00</b>		<b>\$ 0.00</b>

**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.**

\$ 0.00

### SUMMARY OF LOBBYING EXPENDITURES

**EXPENDITURES**

1. Salary and Compensation	Schedule B Total	\$	225,219.23
2. Support Personnel	Schedule C Total		0.00
3. Communication Expenses	Schedule E Total		32,178.06
4. Travel and Lodging	Schedule F Total		3,484.15
5. Benefit Passing	Schedule G-1 and Schedule G-2 Total		0.00
<b>Total Lobbying Expenditures</b>		<b>\$</b>	<b>260,881.44</b>

### 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. American Airlines	\$ 8,000.00
2. Coventry	90,882.25
3. Committee On Interns and Residents/SEIU	60,190.15
4. Greater New York Hospital Association	11,003.81
5. RC Cape May Holdings, LLC	166,062.60
6. Univision Communications, Inc.	0.00
7. RJ Lee Group, Inc.	28,336.42
8. Health First Management Services, LLC	80,427.16
9. K-12, Inc.	30,016.88
10. Change to Win	0.00
11. Medco	4,500.00
12. Mount Construction	0.00
13. Shushana	0.00
14. Federal Express, Inc.	60,000.00
15. T-Mobile USA, Inc.	5,082.83
16. American International Group, Inc.	79,145.23
17. Verizon Communications, Inc.	52,500.00
18. Earle Companies	0.00
<b>TOTAL RECEIPTS</b>	<b>\$ 676,147.33</b>

**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, Ellen Conovitz

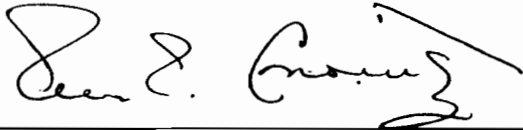
*(print name)*

hereby certify that I am duly authorized by

Tonio Burgos & Associates of New Jersey, LLC

*(print name of firm)*

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.



Signature

February 12, 2010

Date