

FORM L1-A
Reporting For Calendar Year 2010

ANNUAL REPORT
OF
GOVERNMENTAL AFFAIRS AGENT



FEB 14 2011

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

FOR STATE USE ONLY

Amendment

Name of Governmental Affairs Agent or Governmental Affairs Agent Firm:

DeCotiis, Fitzpatrick & Cole, LLP

Business Glenpointe Centre West

Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

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

1. Name Michael Cole

Registration Number 939-12 Occupation or Business Attorney

Business Address 500 Frank W., Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

2. Name William Harla

Registration Number 939-2 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

3. Name Jerrold Binney

Registration Number 939-14 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

4. Name M. Robert DeCotiis

Registration Number 939-17 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

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

1. Name Michael Luchkiw

Registration Number 939-21 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

2. Name Daren Eppley

Registration Number 939-19 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

3. Name Matt Karrenberg

Registration Number 939-20 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

4. Name Frank Borin

Registration Number 939-23 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

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

1. Name Kevin Kinsella

Registration Number 939-26 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

2. Name Francis X. Regan

Registration Number 939-29 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

3. Name Anthony LaBue

Registration Number 939-27 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

4. Name Susan Fruchtman

Registration Number 939-24 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

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

1. Name Ryan J. Scerbo

Registration Number 939-31 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

2. Name Louis N. Rainone

Registration Number 939-32 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

3. Name Victoria Flynn

Registration Number 939-35 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

4. Name Thomas Abbate

Registration Number 939-34 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

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

1. Name Stephen Pearlman

Registration Number 939-22 Occupation or Business Attorney

Business Address 500 Frank W. Burr Boulevard

City Teaneck State NJ Zip Code 07666

*(Area Code) Telephone Number 201-928-1100

2. Name _____

Registration Number _____ Occupation or Business _____

Business Address _____

City _____ State _____ Zip Code _____

*(Area Code) Telephone Number _____

3. Name _____

Registration Number _____ Occupation or Business _____

Business Address _____

City _____ State _____ Zip Code _____

*(Area Code) Telephone Number _____

4. Name _____

Registration Number _____ Occupation or Business _____

Business Address _____

City _____ State _____ Zip Code _____

*(Area Code) Telephone Number _____

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

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 Alsan Realty c/o Alfred Sanzari Enterprises

Business Address Court Plaza North -
25 Main Street

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

City Hackensack State NJ Zip Code 07601

Type of Business Realty

2. Name of Represented Entity M.R.L. Laplace, LLC

Business Address 258 Ridge Road

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

City Chester State NJ Zip Code 07666

Type of Business Property Holding Company

3. Name of Represented Entity Our Lady of the Magnificat R.C.C.

Business Address 2 Miller Road

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

City Kinnelon State NJ Zip Code 07405

Type of Business Church

4. Name of Represented Entity Willow Lake Day Camp

Business Address PO Box 1266

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

City Highland Park State NJ Zip Code 08904

Type of Business Day Camp

5. Name of Represented Entity Conner Strong

Business Address 401 Route 73 North, 3rd Floor

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

City Marlton State NJ Zip Code 08053

Type of Business Insurance

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 Ocean Risk Retention Group

Business Address 837 Kearny Avenue

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

City Kearny State NJ Zip Code 07032

Type of Business Insurance

2. Name of Represented Entity Alex Tsvaygoft

Business Address 25 Mrytle Road

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

City East Brunswick State NJ Zip Code 08816

Type of Business Real Estate

3. Name of Represented Entity Red Bank Affordable Housing

Business Address c/o Pilgrim Baptist Church
172 Shrewsbury Avenue

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

City Red Bank State NJ Zip Code 07701

Type of Business Housing

4. Name of Represented Entity Correctional Dental

Business Address 192 West State Street

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

City Trenton State NJ Zip Code 08608

Type of Business Dental

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 Capital Health System

Business Address 750 Brunswick Avenue

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

City Trenton State NJ Zip Code 08638

Type of Business Health Care

2. Name of Represented Entity Hackensack University Medical Center

Business Address 30 Prospect Avenue

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

City Hackensack State NJ Zip Code 07601

Type of Business Hospital

3. Name of Represented Entity NJ Council of Teaching Hospitals

Business Address 154 West State Street

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

City Trenton State NJ Zip Code 08608

Type of Business Hospital

4. Name of Represented Entity Edison Properties

Business Address 100 Washington Street

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

City Newark State NJ Zip Code 07102

Type of Business Redeveloper/Parking

5. Name of Represented Entity Meadowlands Management

Business Address 1 Meadowlands Plaza, 10th Floor

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

City East Rutherford State NJ Zip Code 07073

Type of Business Real Estate Developer

2a. OTHER REPRESENTED ENTITIES

Provide the following information concerning other Represented Entities.

1. Name of Represented Entity Spectra Energy

Business Address 890 Winter Street

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

City Waltham State MA Zip Code 02451

Type of Business Natural Gas Transportation

2. Name of Represented Entity Group @ Route 3

Business Address 16 Microlab Road
Suite A

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

City Livingston State NJ Zip Code 07039

Type of Business Land Development

3. Name of Represented Entity County Concrete Corp.

Business Address 50 Railroad Avenue
PO Box F

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

City Kenvil State NJ Zip Code 07847

Type of Business Concrete

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 Victoria Flynn, Esq.

Name of Authority, Board, or Commission Nutley Library Board

Date When Term of Service Expires 12/31/11

Name of Governmental Affairs Agent William Harla, Esq.

Name of Authority, Board, or Commission NJ Supreme Court Committee on the Unauthorized Practice of Law

Date When Term of Service Expires 12/31/11

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
Michael Cole	\$ 191.25
William Harla	36,607.50
Jerrold Binney	75.00
M. Robert DeCotiis	0.00
Michael Luchkiw	17,420.00
Daren Eppley	315.00
Matt Karrenberg	0.00
Frank Borin	2,920.00
Kevin Kinsella	10,344.50
SCHEDULE B TOTAL \$	67,873.25

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 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
Francis X. Regan	\$ 1,140.00
Anthony La Bue	0.00
Susan Fruchtman	0.00
Ryan J. Scerbo	0.00
Louis N. Rainone	1,125.00
Victoria Flynn	1,715.00
Thomas Abbate	0.00
Stephen Pearlman	0.00
SCHEDULE B TOTAL \$	3,980.00

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 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	\$ 50.00
Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet	
Postage	25.00
Telephone, Telegram, Facsimile	25.00
Pro Rata Overhead Costs of Specific Events Over \$100 (please identify name and date of event)	
Other (please describe):	

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
Francis X. Regan	\$ 24.75

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 \$ _____
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	\$ _____	+	\$ _____	=	\$ _____
Food and Beverage	_____	+	_____	=	_____
Travel	_____	+	_____	=	_____
Lodging	_____	+	_____	=	_____
Honoraria	_____	+	_____	=	_____
Loans	_____	+	_____	=	_____
Gifts	_____	+	_____	=	_____
Other (specify) _____	_____	+	_____	=	_____
Total	\$ _____ 0.00	+	\$ _____ 0.00	=	\$ _____ 0.00

**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	\$ _____ 71,853.25
2. Support Personnel	Schedule C Total	_____ 0.00
3. Communication Expenses	Schedule E Total	_____ 100.00
4. Travel and Lodging	Schedule F Total	_____ 24.75
5. Benefit Passing	Schedule G-1 and Schedule G-2 Total	_____ 0.00
Total Lobbying Expenditures		\$ _____ 71,978.00

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. Alex Tsvaygoft	\$ 105.00
2. Alsan Realty	754.00
3. Capital Health Systems	2,010.00
4. Conner Strong	8,250.00
5. Correctional Dental	6,865.00
6. County Concrete Corp.	252.50
7. Edison Properties	1,953.00
8. Group @ Route 3	1,140.00
9. Hackensack University	3,038.75
10. L & M Laplace Chemicals	5,817.50
11. Meadowlands Management	1,465.00
12. NJ Council of Teaching Hospitals	1,960.00
13. Ocean Risk Retention	14,917.50
14. Our Lady of Magnificat	315.00
15. Red Bank Affordable Housing	2,920.00
16. Spectra Energy	18,350.00
17. Willow Lake Day Camp	1,740.00
18.	
	<p style="text-align: right;">TOTAL RECEIPTS \$ 71,853.25</p>

CERTIFICATION

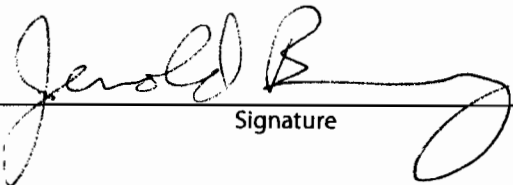
This certification shall be signed by either the Governmental Affairs Agent filing this Annual Report on his/her own behalf, or by the Managing or Principal Partner or Chief Executive Officer of the Governmental Affairs Agent Firm.

I, Jerrold Binney
(print name)

hereby certify that I am duly authorized by

DeCotiis, Fitzpatrick & Cole
(print name of firm)

to file and certify the accuracy and correctness of this Annual Report of Lobbying Activity for calendar year 2010.
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 11, 2011
Date