



ANNUAL REPORT OF REPRESENTED ENTITY

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION
P.O. Box 185, Trenton, NJ 08825-0185
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)
Website www.elec.state.nj.us

FORM L1-L Reporting For Calendar Year 2009

ELEC RECEIVED MAR 02 2010

FOR STATE USE ONLY

Amendment [checked]

Name of Represented Entity JANUS Solutions

Business Address 83 Princeton Avenue, Suite 2C

City Hopewell

State NJ

Zip Code 08525

*(Area Code) Telephone Number 609-466-0200 x104

RECEIVED VIA FAX

DUPLICATE

1. Provide the following information regarding the Governmental Affairs Agent(s) employed by the Represented Entity named above.

1 Name Thomas Blatner

Registration Number 1658-1 Job Title Human Services Consulting

Business Address 83 Princeton Avenue, Suite 2C

City Hopewell State NJ Zip Code 08525

*(Area Code) Telephone Number

2. Name

Registration Number Job Title

Business Address

City State Zip Code

*(Area Code) Telephone Number

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

*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.

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. **NOTE:** 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

\$ 1,569.00

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
1.		\$
2.		
3.		
4.		
5.		
6.		
7.		
Total \$		
SCHEDULE B TOTAL \$		1,569.00

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 C TOTAL \$ 0.00

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	\$ _____	+ \$ _____	= \$ _____
			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.**

\$ _____

SUMMARY OF LOBBYING EXPENDITURES

EXPENDITURES

1. Salary and Compensation (Add the total from questions 1 & 2)	Schedule B Total \$	1,569.00
2. Support Personnel	Schedule C Total	0.00
3. Assessments, Membership Fees, or Dues	Schedule D-1 and Schedule D-2 Total	0.00
4. Communication Expenses	Schedule E Total	0.00
5. Travel and Lodging	Schedule F Total	750.00
6. Benefit Passing	Schedule G-1 and Schedule G-2 Total	0.00
Total Lobbying Expenditures \$		2,319.00

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.

I, Patrice Janoch

(print name)

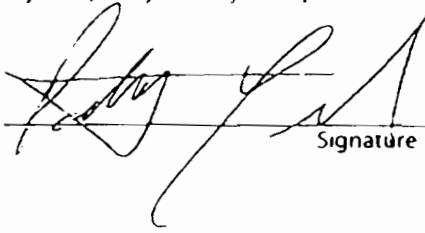
hereby certify that I am duly authorized by

JANUS Solutions

(print name of Represented Entity)

to file and certify the accuracy and correctness of this Annual Report of Lobbying Activity for calendar year _____

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

March 2, 2009

Date