

DUPLICATE



ANNUAL REPORT OF REPRESENTED ENTITY

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

FORM L1-L Reporting For Calendar Year 2009

ELEC RECEIVED FEB 23 2010

FOR STATE USE ONLY

Amendment [checked]

Name of Represented Entity State Street Associates
Business Address 150 West State Street
City Trenton State NJ Zip Code 08608
\*(Area Code) Telephone Number 609-392-0559

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

1. Name
Registration Number Job Title
Business Address
City State Zip Code
\*(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 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	\$ 51,824.14
Film, Slides, Video, Audio, TV, Radio, Other Broadcast Medium, including the Internet	11,781.93
Postage	13,352.34
Telephone, Telegram, Facsimile	2,400.00
Pro Rata Overhead Costs of Specific Events Over \$100 (please identify name and date of event)	
Other (please describe)	
<b>SCHEDULE E TOTAL \$</b>	
	<b>79,358.41</b>

**SCHEDULE F - TRAVEL/LODGING**

**PURPOSE:** To report the travel and lodging costs of the Governmental Affairs Agents who are employees of the Represented Entity named on page 1, question 1, related to influencing legislation, regulations, governmental processes, or communicating with the general public.

NAME OF GOVERNMENTAL AFFAIRS AGENT	AMOUNT
Hal Bozarth (1797-1)	\$ 1,827.33
Anthony Russo (1797-2)	332.45
Edward Waters (1797-3)	1,617.45
<b>SCHEDULE F TOTAL \$</b>	
	<b>3,777.23</b>

### 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) _____	_____	+ _____	= _____
<b>Total</b>	<b>\$ _____</b>	<b>+ \$ _____</b>	<b>= \$ _____ 0.00</b>
			<b>SCHEDULE G-1 AND SCHEDULE G-2 TOTAL</b>

\* 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.** \$ \_\_\_\_\_ .00

### SUMMARY OF LOBBYING EXPENDITURES

**EXPENDITURES**

1. Salary and Compensation (Add the total from questions 1 & 2)	Schedule B Total \$	0.00
2. Support Personnel	Schedule C Total	0.00
3. Assessments, Membership Fees, or Dues	Schedule D-1 and Schedule D-2 Total	221,250.00
4. Communication Expenses	Schedule E Total	79,358.41
5. Travel and Lodging	Schedule F Total	3,777.23
6. Benefit Passing	Schedule G-1 and Schedule G-2 Total	0.00
<b>Total Lobbying Expenditures \$</b>		<b>304,385.64</b>

**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, Hal Bozarth

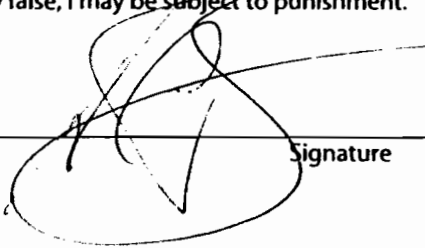
*(print name)*

hereby certify that I am duly authorized by

State Street Associates

*(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

February 18, 2010  
Date