



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 2010

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N.J. ELECTION LAW ENFORCEMENT COMMISSION Amendment

Name of Represented Entity Atlantic City Electric

Business Address 5100 Harding Highway

City Mays Landing State NJ Zip Code 08330

*(Area Code) Telephone Number (609) 909-7031

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

1. Name Susan Coan

Registration Number 1567-4 Job Title Director- NJ State Relations

Business Address 150 West State Street

City Trenton State NJ Zip Code 08608

*(Area Code) Telephone Number (609) 909-7032

2. Name Roger E. Pedersen

Registration Number 1567-1 Job Title Manager- Regulatory Affairs

Business Address 5100 Harding Highway

City Mays Landing State NJ Zip Code 08330

*(Area Code) Telephone Number (609) 625-5820

3. Name Wayne W. Barndt

Registration Number 1570-1 Job Title Manager- Regulatory Strategy & Policy

Business Address 401 Eagle Run Road, P.O. Box 9239

City Newark State DE Zip Code 19714

*(Area Code) Telephone Number (302) 454-4597

4. Name Charles A. Wimberg

Registration Number 1491-1 Job Title Vice President

Business Address 5100 Harding Highway

City Mays Landing State NJ Zip Code 08330

*(Area Code) Telephone Number (609) 625-5281

*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.

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	\$ 242.00	+	\$ 0.00	=	\$ 242.00
Food and Beverage	_____	+	_____	=	_____
Travel	_____	+	_____	=	_____
Lodging	_____	+	_____	=	_____
Honoraria	_____	+	_____	=	_____
Loans	_____	+	_____	=	_____
Gifts	_____	+	_____	=	_____
Other(specify) _____	_____	+	_____	=	_____
Total	\$ 242.00	+	\$ _____	=	\$ 242.00

**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.**

\$ _____ 42.00

SUMMARY OF LOBBYING EXPENDITURES

EXPENDITURES

1. Salary and Compensation (Add the total from questions 1 & 2)	Schedule B Total \$	417,695.00
2. Support Personnel	Schedule C Total	56,250.00
3. Assessments, Membership Fees, or Dues	Schedule D-1 and Schedule D-2 Total	750.00
4. Communication Expenses	Schedule E Total	1,210.00
5. Travel and Lodging	Schedule F Total	12,777.00
6. Benefit Passing	Schedule G-1 and Schedule G-2 Total	242.00
	Total Lobbying Expenditures \$	488,924.00

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, Susan Coan
(print name)

hereby certify that I am duly authorized by

Atlantic City Electric
(print name of Represented Entity)

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 17, 2011
Date