



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

ELEC RECEIVED FEB 14 2011

FOR STATE USE ONLY

Amendment [checked]

Name of Represented Entity New Jersey Principals and Supervisors Association

Business Address 12 Centre Drive

City Monroe Township State NJ Zip Code 08831

*(Area Code) Telephone Number 609-860-1200

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

1. Name Debra Bradley, Esq.

Registration Number 155-2 Job Title Director of Government Relations

Business Address Same as Represented Entity

City State Zip Code

*(Area Code) Telephone Number

2. Name Jennifer Keyes-Maloney, Esq.

Registration Number 155-14 Job Title Assistant Director of Government Relations

Business Address Same as Represented Entity

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.

2. Provide the following information regarding the Governmental Affairs Agent(s) retained or otherwise engaged by the Represented Entity.

1. Name of Agent or Firm _____
Business Address _____
City _____ State _____ Zip Code _____
*(Area Code) Telephone Number _____ Occupation/Business _____

2. Name of Agent or Firm _____
Business Address _____
City _____ State _____ Zip Code _____
*(Area Code) Telephone Number _____ Occupation/Business _____

SCHEDULE A

1. Did any Governmental Affairs Agent named on page 1, question 1, 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 Debra Bradley, Esq.

Name of Authority, Board, or Commission NCLB Advisory Council

Date When Term of Service Expires January 2011

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 the Governmental Affairs Agent(s) named on page 1, question 1 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.

*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.

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, Debra J. Bradley, Esq.

(print name)

hereby certify that I am duly authorized by

New Jersey Principals & Supervisors Association

(print name of Represented Entity)

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

Debra J. Bradley
Signature

2-14-11
Date