

2010 Client Annual Report for Fairness for Home Care Alliance

Client Information

Client Name	Fairness for Home Care Alliance
Business Address	Glaser & Weiner, LLP, 175 East Shore Road, Ste 300, Great Neck, NY 11023
Client P.O. Name	Glaser, Roni
Business Phone	(516) 304-5858
Business Email	BLOCKED_EMAIL

Lobbyist Entities

Lobbyist Entity # 1

Lobbyist Entity's Name	Wilson, Elser Moskowitz Edelman & Dicker LLP
Lobbyist Entity's Business Phone	(518) 449-8893
Lobbyist Entity's Business Address	677 Broadway, Albany, NY 12207

Compensation Paid or Owed to Wilson, Elser Moskowitz Edelman & Dicker LLP

Compensation Paid or Owed During the Calendar Year	\$7,500
--	---------

Client Expenses Reimbursed to Wilson, Elser Moskowitz Edelman & Dicker LLP

Total of Aggregate Expenses \$75.00 or less	\$0.00
---	--------

Are there expenses greater than \$75.00?	YES
--	-----

Itemized Expenses

Itemized Expense # 1

Paid to	Wilson, Elser Moskowitz Edelman & Dicker LLP
Purpose	Reimbursed Expenses
Amount	\$450.00
Itemized Expense Total	\$450.00

2010 Client Annual Report for Fairness for Home Care Alliance

Lobbying Activities

Activity # 1

Subject Category Procurement

Subject Details Procurement issues

Target	Office/Department	Contact Name
Office of the Contract Services		Hanratty, Kevin Luce, Jake

CERTIFICATION

I certify that all statements made on this report are true and correct to the best of my knowledge and belief, and I understand that the willful false statement of any material fact herein will subject me to the provisions of law relevant to the making of false instruments and will render such statement null and void.

Principal Officer Name	Glaser, Roni
Principal Officer Email	BLOCKED_EMAIL
Certification Date	01/05/2011 15:35

ELECTRONIC SIGNATURE

Roni Glaser was required to indicate acceptance of the representations made in the following statement by entering his or her password used to access the E-Lobbyist, New York City Lobbyist Filing System and pressing the Submit button to affix his or her electronic signature and file the report with the Office of City Clerk - City of New York.

"I certify that all statements made on this report are true and correct to the best of my knowledge and belief, and I understand that the willful false statement of any material fact herein will subject me to the provisions of law relevant to the making of false instruments and will render such statement null and void."