

## 2011 P5 Client Periodic Report

Lobbyist Name: Cozen O'Connor

Client Name: Bally Total Fitness Corporation

### Lobbyist Information

|                           |  |
|---------------------------|--|
| Principal Officer Name    | Bronston, David  |
| Principal Officer Title   | Principal Officer  |
| Principal Officer Email   | BLOCKED_EMAIL  |
| Principal Officer Phone   | (212) 883-4942   |
| Lobbyist Business Name    | Cozen O'Connor   |
| Lobbyist Business Address | 277 Park Avenue, New York, NY 10172 United States of America |
| Lobbyist Business Phone   | (212) 986-1116   |

### Client Information

|                  |   |
|------------------|---|
| Client Name      | Bally Total Fitness Corporation   |
| Business Address | 8700 W. Bryn Mawr Avenue, 3rd Floor, Chicago, IL 60631 United States of America |
| Client P.O. Name | Siegel, Ronald  |
| Business Phone   | (773) 864-3763  |
| Business Email   | BLOCKED_EMAIL   |

### Summary of Compensation for Client

|  |        |
|--|--------|
| Total Compensation Paid or Owed for Current Period | \$0.00 |
|--|--------|

### Lobbying Expenses

|   |        |
|---|--------|
| Aggregate of all expenses for salaries of support staff | \$0.00 |
| Total of Aggregate Expenses \$75.00 or less             | \$0.00 |
| Are there expenses greater than \$75.00?                | No     |

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|                        |        |
|------------------------|--------|
| Itemized Expense Total | \$0.00 |
|------------------------|--------|

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|                                   |        |
|-----------------------------------|--------|
| Total Expenses for Current Period | \$0.00 |
|-----------------------------------|--------|

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### Reimbursed Expenses

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|  |        |
|--|--------|
| Total Reimbursed Expenses for Current Period | \$0.00 |
|--|--------|

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### 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 | Bronston, David |
|------------------------|-----------------|

|                         |               |
|-------------------------|---------------|
| Principal Officer Email | BLOCKED_EMAIL |
|-------------------------|---------------|

|                    |                  |
|--------------------|------------------|
| Certification Date | 11/11/2011 18:13 |
|--------------------|------------------|

### ELECTRONIC SIGNATURE

David Bronston 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."