

2012 P2 Client Periodic Report

Lobbyist Name: Lutheran Augustana Center for Extended Care and Rehabilitation, Inc.

Client Name: Lutheran Augustana Center for Extended Care and Rehabilitation, Inc.

Lobbyist Information

Principal Officer Name	Lee, Jeanne
Principal Officer Title	Executive Director/Senior VP for Senior
Principal Officer Email	BLOCKED_EMAIL
Principal Officer Phone	(718) 630-7335
Lobbyist Business Name	Lutheran Augustana Center for Extended Care and Rehabilitation, Inc.
Lobbyist Business Address	5434 2nd Avenue, Brooklyn, NY 11220 United States of America
Lobbyist Business Phone	(718) 630-6125

Client Information

Client Name	Lutheran Augustana Center for Extended Care and Rehabilitation, Inc.
Business Address	5434 2nd Avenue, Brooklyn, NY 11220 United States of America
Client P.O. Name	Lee, Jeanne
Business Phone	(718) 630-6125
Business Email	BLOCKED_EMAIL

Summary of Compensation from Client

Total Compensation Paid or Owed for Current Period	\$0.00
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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

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	Lee, Jeanne
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	05/10/2012 13:00
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ELECTRONIC SIGNATURE

Jeanne Lee 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."