

## 2012 P6 Client Periodic Report/Lobbyist Annual Report

Lobbyist Name: UNIFORMED FIREFIGHTERS ASSN. OF GREATER NY

Client Name: UNIFORMED FIREFIGHTERS ASSN. OF GREATER NY

### Lobbyist Information

Principal Officer Name	SLEVIN, JAMES
Principal Officer Title	Vice President/Legislative Chairman
Principal Officer Email	BLOCKED_EMAIL
Principal Officer Phone	(212) 545-6978
Lobbyist Business Name	UNIFORMED FIREFIGHTERS ASSN. OF GREATER NY
Lobbyist Business Address	204 EAST 23RD STREET, NEW YORK, NY 10010 United States of America
Lobbyist Business Phone	(212) 683-4832

### Client Information

Client Name	UNIFORMED FIREFIGHTERS ASSN. OF GREATER NY
Business Address	204 EAST 23RD STREET, NEW YORK, NY 10010 United States of America
Client P.O. Name	SLEVIN, JAMES
Business Phone	(212) 683-4832
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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<b>Itemized Expense Total</b>	<b>\$0.00</b>
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<b>Total Expenses for Current Period</b>	<b>\$0.00</b>
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**Reimbursed Expenses**

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<b>Total Reimbursed Expenses for Current Period</b>	<b>\$0.00</b>
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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	SLEVIN, JAMES
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	01/07/2013 15:40
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### ELECTRONIC SIGNATURE

JAMES SLEVIN 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."