

2013 P2 Client Periodic Report

Lobbyist Name: Community Housing Improvement Program, Inc.

Client Name: Community Housing Improvement Program, Inc.

Lobbyist Information

Principal Officer Name Siconolfi, Patrick

Principal Officer Title Executive Director

Principal Officer Email BLOCKED_EMAIL

Principal Officer Phone (212) 838-7442

Lobbyist Business Name Community Housing Improvement Program, Inc.

Lobbyist Business Address 5 Hanover Square, suite 1605, New York, NY 10004
United States of America

Lobbyist Business Phone (212) 838-7442

Client Information

Client Name Community Housing Improvement Program, Inc.

Business Address 5 Hanover Square, suite 1605, New York, NY 10004
United States of America

Client P.O. Name Siconolfi, Patrick

Business Phone (212) 838-7442

Business Email BLOCKED_EMAIL

Employee(s) Lobbying for Client

Employee # 1

Employee's Name Condon, Joseph

Employee's Work Address 377 Broadway, 3rd floor, New York, NY 10013 United
States of America

Employee's Work Phone (212) 838-7442

Employee's Salary \$1,416.00

Employee # 2

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Lobbyist Name: Community Housing Improvement Program, Inc.

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Employee's Name	Siconolfi, Patrick
Employee's Work Address	377 Broadway, 3rd floor, New York , NY 10013 United States of America
Employee's Work Phone	(212) 838-7442
Employee's Salary	\$3,083.00

Lobbying Activities

Activity # 1

Subject Category	VIOLATION CLEARANCE
Subject Details	PROCEDURES FOR HOW TO CLEAR HPD VIOLATIONS

Target	Office/Department	Contact Name
Housing Preservation & Development, Department of (HPD)		SANTIAGO, ANN MARIE FERRIGNO, MARIO MUSTACIUOLO, VITO

Activity # 2

Subject Category	NYCHA PROGRAM OPERATIONS
Subject Details	RESOLVING PROCESSING BACKLOGS AND MISTAKES IN NYCHA SECTION 8 RENT PAYMENTS

Target	Office/Department	Contact Name
Housing Authority (NYCHA)		TESORIERO, ROBERT RODGERS, COLETTE MCBRIDE, YOLANDA HOUSE, CECIL PENNINGTON, KATHY DIAZ, LISA

Activity # 3

Subject Category	PROGRAM OPERATIONS
Subject Details	PROCESSING OF SCRIE AND DRIE TAX CREDITS

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Lobbyist Name: Community Housing Improvement Program, Inc.

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Target	Office/Department	Contact Name
Finance, Department of (DOF)		MEYERS, SARAH OBERMAN, THEODORE MUNSON, ERIC

Activity # 4

Subject Category PROGRAM OPERATIONS

Subject Details OW TO PERFORM BENCHMARKING DUTIES

Target	Office/Department	Contact Name
Buildings, Department of (DOB)		WALLACE, ANDREW

Activity # 5

Subject Category Rate Making Proceeding

Subject Details RENT GUIDELINES BOARD ORDER 45

Target	Office/Department	Contact Name
Rent Guidelines Board (RGB)		MCLAUGHLIN, ANDREW KIMMEL, JONATHAN LEVY ODOM, TANYA MOORE, COURTNEY SHINE, CAROL WENK, DAVID CRUZ, MAGDA SCHLEIDER, STEVEN CHEIGH, BRIAN EPSTEIN, HARVEY

Activity # 6

Subject Category Rate Making Proceeding

Subject Details WATER RATES FOR 2014

Target	Office/Department	Contact Name
Environmental Protection, Department of (DEP)		EASPARRO, DIANE

Activity # 7

Subject Category PROGRAM OPERATIONS

Subject Details ELEVATOR INSPECTIONS AND VIOLATIONS

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Target	Office/Department	Contact Name
Buildings, Department of (DOB)		LIMANDRI, ROBERT SANTULLI, CHRISTOPHER VYAS, HIREN

Summary of Compensation from Client

Total Compensation Paid or Owed for Current Period \$4,499.00

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

Itemized Expense Total \$0.00

Total Expenses for Current Period \$0.00

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	Siconolfi, Patrick
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	05/09/2013 13:15
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ELECTRONIC SIGNATURE

Patrick Siconolfi 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."