

2008 Client Annual Report for Kingsbrook Jewish Medical Center

Client Information

Client Name	Kingsbrook Jewish Medical Center
Business Address	585 Schenectady Avenue, Brooklyn, NY 11203
Client P.O. Name	Zinder, Susan
Business Phone	(718) 604-5216
Business Email	BLOCKED_EMAIL

Lobbyist Entities

Lobbyist Entity # 1

Lobbyist Entity's Name	Bolton-St. Johns LLC
Lobbyist Entity's Business Phone	(518) 462-4620
Lobbyist Entity's Business Address	146 State St., Lower Level, Albany, NY 12207
Compensation Paid or Owed During the Calendar Year	\$120,000

Lobbying Activities

Activity # 1

Subject Category	Budget
Subject Details	funding for equipment for the hospital and clarification on a capital request for radiology equipment
Is the Lobbying Target an Entity or a Person?	entity
Lobbying Target's Name	NYC Councilman - Lewis Fidler
Is the Lobbying Target an Entity or a Person?	entity
Lobbying Target's Name	NYC Council Finance Div. (Capital) - Jeff Rodus

Lobbying Expenses

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

Itemized Expense Total	\$0.00
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Total Compensation Paid or Owed During the Calendar Year	\$120,000.00
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Total Expenses and Compensation for Year	\$120,000.00
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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	Zinder, Susan
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	01/26/2009 16:47
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ELECTRONIC SIGNATURE

Susan Zinder 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."