

## 2009 P2 Client Periodic Report

Lobbyist Name: Sheinkopf LTD.

Client Name: Selfhelp Community Services, Inc.

### Lobbyist Information

Principal Officer Name Sheinkopf, Hank

Principal Officer Title President

Principal Officer Email BLOCKED\_EMAIL

Principal Officer Phone (212) 725-2378

Lobbyist Business Name Sheinkopf LTD.

Lobbyist Business Address 152 Madison Avenue, New York, NY 10016

Lobbyist Business Phone (212) 725-2378

### Client Information

Client Name Selfhelp Community Services, Inc.

Business Address 520 8th Avenue, New York, NY 10018

Client P.O. Name Goldstein, Samuel

Business Phone (718) 939-6210

Business Email BLOCKED\_EMAIL

### Employee(s) Lobbying for Client

#### Employee # 1

Employee's Name Sheinkopf, Hank

Employee's Work Address 152 Madison Ave, Suite 1603, New York, NY 10016

Employee's Work Phone (212) 725-2378

### Summary of Compensation

Total Compensation Paid or Owed for Current Period \$8,000.00

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Year to Date Total Compensation Paid or Owed	\$8,000.00
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### Lobbying Expenses

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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 Expense Total	\$0.00
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Total Expenses for Current Period	\$0.00
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Year to Date Total of Expenses	\$0.00
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Client Name: Selfhelp Community Services, Inc.

### 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	Sheinkopf, Hank
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	05/15/2009 14:57
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### ELECTRONIC SIGNATURE

Hank Sheinkopf 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."