

2009 P2 Client Periodic Report

Lobbyist Name: Bolton-St. Johns LLC

Client Name: Bronx Community Pride Center, Inc.

Lobbyist Information

Principal Officer Name: McCarthy, Bill

Principal Officer Title: Partner

Principal Officer Email: BLOCKED_EMAIL

Principal Officer Phone: (518) 462-4620

Lobbyist Business Name: Bolton-St. Johns LLC

Lobbyist Business Address: 146 State St., Lower Level, Albany, NY 12207

Lobbyist Business Phone: (518) 462-4620

Client Information

Client Name: Bronx Community Pride Center, Inc.

Business Address: 448 E. 149th St., Bronx, NY 10455

Client P.O. Name: Winters, Lisa

Business Phone: (718) 292-4368

Business Email: BLOCKED_EMAIL

Employee(s) Lobbying for Client

Employee # 1

Employee's Name: Wright, John

Employee's Work Address: 110 William St., NYC, NY 10038

Employee's Work Phone: (212) 431-4748

Lobbying Activities

Activity # 1

2009 P2 Client Periodic Report

Lobbyist Name: Bolton-St. Johns LLC

Client Name: Bronx Community Pride Center, Inc.

Subject Category	Budget
Subject Details	funding for operations and programs for gay & lesbian teens
Is the Lobbying Target an Entity or a Person?	entity
Lobbying Target's Name	Scott Crowley - NYC Speaker's Office - Finance Div.

Summary of Compensation

Total Compensation Paid or Owed for Current Period	\$3,000.00
Year to Date Total Compensation Paid or Owed	\$3,000.00

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
Year to Date Total of Expenses	\$0.00

2009 P2 Client Periodic Report

Lobbyist Name: Bolton-St. Johns LLC

Client Name: Bronx Community Pride Center, 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	McCarthy, Bill
------------------------	----------------

Principal Officer Email	BLOCKED_EMAIL
-------------------------	---------------

Certification Date	05/27/2009 14:22
--------------------	------------------

ELECTRONIC SIGNATURE

Bill McCarthy 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."