

# 2009 P6 Client Periodic Report/Lobbyist Annual Report

Lobbyist Name: PATRICIA LYNCH ASSOCIATES

Client Name: Trump Village Section Four

## Lobbyist Information

Principal Officer Name lynch, patricia

Principal Officer Title PRESIDENT

Principal Officer Email BLOCKED\_EMAIL

Principal Officer Phone (518) 432-9220

Lobbyist Business Name PATRICIA LYNCH ASSOCIATES

Lobbyist Business Address 677 BROADWAY, SUITE 1105, ALBANY, NY 12207

Lobbyist Business Phone (518) 432-9220

## Client Information

Client Name Trump Village Section Four

Business Address 2928 West 5 Street, Brooklyn, NY 11224

Client P.O. Name Riback, Fern

Business Phone (718) 946-4800

Business Email BLOCKED\_EMAIL

## Employee(s) Lobbying for Client

### Employee # 1

Employee's Name CUMMINGS, MICHELLE

Employee's Work Address 677 BROADWAY, SUITE 1105, ALBANY, NY 12207

Employee's Work Phone (518) 432-9220

## Summary of Compensation

Total Compensation Paid or Owed for Current Period \$0.00

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Year to Date Total Compensation Paid or Owed	\$0.00
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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: Trump Village Section Four

### 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	lynch, patricia
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	01/15/2010 14:24
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### ELECTRONIC SIGNATURE

patricia lynch 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."