

## Client Information

<b>Client Name</b>	American Insurance Association, Inc.
<b>Business Address</b>	95 Columbia Street, Albany, NY 12210
<b>Client P.O. Name</b>	Murphy, John
<b>Business Phone</b>	(518) 462-1695
<b>Business Email</b>	BLOCKED_EMAIL

## Lobbyist Entities

### Lobbyist Entity # 1

<b>Lobbyist Entity's Name</b>	Wilson, Elser Moskowitz Edelman & Dicker LLP
<b>Lobbyist Entity's Business Phone</b>	(518) 449-8893
<b>Lobbyist Entity's Business Address</b>	677 Broadway, Albany, NY 12207
<b>Compensation Paid or Owed During the Calendar Year</b>	\$0

## Lobbying Activities

### Activity # 1

**Subject Category** Introduction

**Subject Details** Introduction 718

Target	Office/Department	Contact Name
Attaches of the Council		Halm, Baba Goodman, Ben

### Activity # 2

**Subject Category** Clinic Certification

**Subject Details** Clinic Certification

Target	Office/Department	Contact Name
NYC Council Members	Yassky, David - District No. 33	

**Reimbursed Client Expenses (Expenses Reimbursed to the Lobbyist)**

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Aggregate of all expenses for salaries of support staff	\$45,600.00
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Total of Aggregate Expenses \$75.00 or less	\$1,440.00
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Are there expenses greater than \$75.00?	No
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**Itemized Expenses**

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Itemized Expense Total	\$0.00
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Total Compensation Paid or Owed During the Calendar Year	\$0.00
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Total Expenses and Compensation for Year	\$47,040.00
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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	Murphy, John
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	01/25/2010 11:08
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## ELECTRONIC SIGNATURE

John Murphy 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."