

## 2010 P1 Client Periodic Report

Lobbyist Name: Sunset Park Health Council, Inc. d/b/a Lutheran Family Healt

Client Name: Sunset Park Health Council, Inc. d/b/a Lutheran Family Healt

### Lobbyist Information

|                           |  |
|---------------------------|--|
| Principal Officer Name    | McReynolds, Larry  |
| Principal Officer Title   | Executive Director   |
| Principal Officer Email   | BLOCKED_EMAIL  |
| Principal Officer Phone   | (718) 630-7216   |
| Lobbyist Business Name    | Sunset Park Health Council, Inc. d/b/a Lutheran Family Healt |
| Lobbyist Business Address | 150 55th Street, Brooklyn, NY 11220                          |
| Lobbyist Business Phone   | (718) 630-7216   |

### Client Information

|                  |  |
|------------------|--|
| Client Name      | Sunset Park Health Council, Inc. d/b/a Lutheran Family Healt |
| Business Address | 150 55th Street, Brooklyn, NY 11220                          |
| Client P.O. Name | McReynolds, Larry  |
| Business Phone   | (718) 630-7216   |
| Business Email   | BLOCKED_EMAIL  |

### Employee(s) Lobbying for Client

#### Employee # 1

|                         |                                     |
|-------------------------|-------------------------------------|
| Employee's Name         | Hall, Cheryl-Anne                   |
| Employee's Work Address | 150 55th Street, Brooklyn, NY 11220 |
| Employee's Work Phone   | (718) 630-7300                      |

### Lobbying Activities

#### Activity # 1

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Lobbyist Name: Sunset Park Health Council, Inc. d/b/a Lutheran Family Health

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**Subject Category** Project with local association for health care delivery

**Subject Details** Caribbean Women's Health Association and Lutheran Family Health Centers collaboration

| Target                       | Office/Department | Contact Name   |
|------------------------------|-------------------|----------------|
| Borough President - Brooklyn |                   | Graham, Yvonne |

### Summary of Compensation

**Total Compensation Paid or Owed for Current Period** \$0.00

**Year to Date Total Compensation Paid or Owed** \$0.00

### Lobbying Expenses

**Aggregate of all expenses for salaries of support staff** \$0.00

**Total of Aggregate Expenses \$75.00 or less** \$32.00

**Are there expenses greater than \$75.00?** No

**Itemized Expense Total** \$0.00

**Total Expenses for Current Period** \$32.00

**Year to Date Total of Expenses** \$32.00

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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 | McReynolds, Larry |
|------------------------|-------------------|

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

|                    |                  |
|--------------------|------------------|
| Certification Date | 03/15/2010 11:57 |
|--------------------|------------------|

### ELECTRONIC SIGNATURE

Larry McReynolds 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."