

2010 P4 Client Periodic Report

Lobbyist Name: Connelly Communications, Inc.

Client Name: DOCTORS COUNCIL

Lobbyist Information

Principal Officer Name Connelly, Maureen

Principal Officer Title President

Principal Officer Email BLOCKED_EMAIL

Principal Officer Phone (212) 437-7373

Lobbyist Business Name Connelly Communications, Inc.

Lobbyist Business Address 64 Fulton Street Suite 1105, new York, NY 10038

Lobbyist Business Phone (212) 437-7373

Client Information

Client Name DOCTORS COUNCIL

Business Address 50 BROADWAY, NEW YORK, NY 10004

Client P.O. Name Liebowitz, Barry

Business Phone (212) 532-7690

Business Email BLOCKED_EMAIL

Employee(s) Lobbying for Client

Employee # 1

Employee's Name Connelly, Maureen

Employee's Work Address 64 Fulton Street, New York, NY 10038

Employee's Work Phone (212) 437-7373

Lobbying Activities

Activity # 1

2010 P4 Client Periodic Report

Lobbyist Name: Connelly Communications, Inc.

Client Name: DOCTORS COUNCIL

Subject Category doctor layoffs at Harlem Hospital

Subject Details doctor layoffs at Harlem Hospital
CC Domenic Recchia re: layoffs at Coney Island Hospital
NYS Sen Bill Perkins - Harlem Hospital layoffs
NYS Assemblyman Keith Wright - Harlem Hospital layoffs

Target	Office/Department	Contact Name
NYC Council Members	Recchia, Jr., Domenic M. - District No. 47	

Summary of Compensation

Total Compensation Paid or Owed for Current Period \$12,000.00

Year to Date Total Compensation Paid or Owed \$48,000.00

Lobbying Expenses

Aggregate of all expenses for salaries of support staff \$25.00

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 \$25.00

Year to Date Total of Expenses \$100.00

2010 P4 Client Periodic Report

Lobbyist Name: Connelly Communications, Inc.

Client Name: DOCTORS COUNCIL

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	Connelly, Maureen
------------------------	-------------------

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

Certification Date	09/09/2010 12:06
--------------------	------------------

ELECTRONIC SIGNATURE

Maureen Connelly 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."