

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2011

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 847-3901. The completed disclosure form is due May 15, 2012 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

Celeste M. Riley

PRINT NAME

CHECK APPROPRIATE HOUSE: Senate General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2011. Please note that a minor child is a child under the age of 18. For each entry, mark the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

I. EARNED INCOME: List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing and fees.)

	Name of Employer	Address of Employer	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>Morris Goodwin Elem. School</u>	<u>Ye Greate Street, Greenwich, NJ 08323</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u>State of NJ</u>	<u>Trenton, NJ</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	<u>PSEG</u>	<u>Salem, NJ</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4)	<u>Bridgeton Family Medicine</u>	<u>Bridgeton, NJ</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5)	<u>Anthropologic</u>	<u>New York City</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

II. UNEARNED INCOME: List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>436 Burlington Road, Bridgeton, NJ</u>	<u>Ford</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	<u>92 W. Commerce Street, Bridgeton, NJ</u>	<u>Pryor, Rodriquez, Yilmel</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)	<u>198 W. Lincoln Street, Bridgeton, NJ</u>	<u>Algarin</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4)	<u>129 New Street, Bridgeton, NJ</u>	<u>Davis</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

See page 1B of 4 for Additional Unearned Income (Rents)

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 OFFICE OF
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ADDITIONAL UNEARNED INCOME (RENTS)

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

II. UNEARNED INCOME: List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Amount Code				Self	Spouse	Child
			1	2	3	4			
5)	398 Irving Ave. Bridgeton, NJ	Carillo	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6)	429 N. 6th Street, Millville, NJ	Brooks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7)	27 Hemlock, Albrightsville, PA	Various Vacation Rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

B. DIVIDENDS

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. INCOME from investments, trusts and estates (including capital gains).

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	T.Rowe Price	New York, NY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

	Name & Nature of Honorarium or Fee	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and indicate whether source is a profit (P), nonprofit (N), or governmental (G) entity.

	Name & Nature of Reimbursement or Prepaid Expense	Address	Amount Code				Self	Spouse	Child	Check Source			
			1	2	3	4				P	N	G	
1)	Riley for Assembly	Bridgeton, NJ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	see Attached CmR 5/14/12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

V. GIFTS: List the name, address, nature and amount for each source of gift to you, your spouse or minor child from a named donor connected to the legislative process.

	Name & Nature of Gift	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

	Name & Nature of Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	ISN Mortgage	Woodstown, NJ	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2)	Colonial Bank Mortgage	Bridgeton, NJ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3)	Wells Fargo Mortgage	DesMoine, Iowa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

	Name & Nature of Forgiven Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	None		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	Treasurer	Greenwich Teachers Association - Greenwich, NJ	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

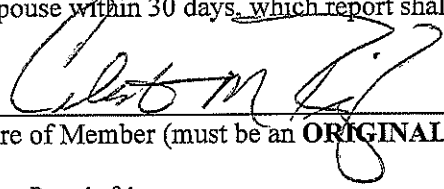
X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	43 Franklin Drive, Bridgeton, NJ	Home	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	436 Burlington Road, Bridgeton NJ	Rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)	92 W. Commerce Street, Bridgeton, NJ	Rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4)	198 W. Lincoln Street, Bridgeton, NJ	Rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

See page 4C of 4 for Additional Real Estate

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

05/01/2012
Date


Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

ADDITIONAL REAL ESTATE

X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
5)	398 Irving Avenue, Bridgeton, NJ	Rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6)	426 N. 6th Street, Millville, NJ	Rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7)	11 Academy, Shiloh, NJ	Office/Garage/Workshop	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OFFICE OF
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SERVICES

CALENDAR YEAR 2011
BENEFIT PASSING - ALPHABETICAL BY RECIPIENT

DATE	RECIPIENT	BENEFIT TYPE	NAME AND ADDRESS OF PAYEE	PROVIDER	AMOUNT
9/13/2011	ANDREW HENDRY, EXECUTIVE DIRECTOR - SENATE MAJORITY OFFICE*	F	OLDE YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	44.94
5/23/2011	ASSEMBLYMAN ALEX DECROCE*	F	OLDE YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	58.00
12/6/2011	ASSEMBLYMAN DANIEL R. BENSON	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
5/23/2011	ASSEMBLYMAN DECLAN J. O'SCANLON, JR.*	F	OLDE YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	58.00
4/29/2011	ASSEMBLYMAN JOHN DIMAIO	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ RIGHT TO LIFE	110.00
1/28/2011	ASSEMBLYMAN JOHN F. AMODEO*	F	DUBLINER, INC., WASHINGTON, DC	ALTRIA CLIENT SERVICES INC & ITS AFFILIATES - AMENDMENT	23.17
10/13/2011	ASSEMBLYMAN JOHN J. BURZICHELLI*	F	NINO GERVASI'S, PAULSBORO, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	38.87
12/6/2011	ASSEMBLYMAN JOHN S. WISNIEWSKI*	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
5/23/2011	ASSEMBLYMAN JON M. BRAMNICK*	F	OLDE YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	58.00
12/6/2011	ASSEMBLYMAN PATRICK J. DIEGNAN JR.*	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
9/23/2011	ASSEMBLYMAN UPENDRA J. CHIVUKULA*	T	ELIZABETHTOWN GAS, BERKELEY HEIGHTS, NJ	ELIZABETHTOWN GAS	65.00
12/6/2011	ASSEMBLYMAN UPENDRA J. CHIVUKULA*	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
10/13/2011	ASSEMBLYWOMAN CELESTE M. RILEY*	F	NINO GERVASI'S, PAULSBORO, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	38.87
12/6/2011	ASSEMBLYWOMAN CONNIE WAGNER	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
9/7/2011	ASSEMBLYWOMAN SHEILA Y. OLIVER	F	CHARLESTON GRILL, CHARLESTON, SC	COVANTA ENERGY CORP - AMENDMENT	53.74
9/20/2011	DAVID JENKINS, CHIEF OF STAFF FOR ASSEMBLYMAN CRYAN*	F	OLDE YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	58.07
9/13/2011	GENE LEPORE, SR. RESEARCH ASSOCIATE - SENATE MAJORITY OFFICE*	F	OLDE YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ - AMENDMENT	44.94
5/17/2011	GEORGE LEBLANC - STAFF, SENATE DEMOCRATIC OFFICE	E	NEW JERSEY PRESS FOUNDATION, WEST TRENTON, NJ	KATZ GOVT AFFAIRS LLC	139.00

*Benefit was reimbursed by recipient.

Page 1 of 3

E = Entertainment F = Food and Beverage G = Gifts H = Honoraria T = Travel L = Lodging O = Other

This summary data reflects the information as reported on the Annual Lobbying reports covering calendar year 2011, received as of 5:00 p.m. on March 1, 2012.