



New York Temporary State Commission on Lobbying On-Line Lobbyist Registration System



User: Lori Donadio

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Lobbyist Bi-Monthly Report

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Form Confirmation #: LBR0000024067

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Year of registration: 2004

Report Period:

Mark one:

January - February

March - April

May - June (Semi-Annual)

July - August

September - October

November - December (Semi-Annual)

Principal Lobbyist Information

Principal Lobbyist Name: CRANE CONSULTING GROUP, LLC

Business Address 1: 90 STATE STREET, STE 1515

Business Address 2:

City: ALBANY

State/Province: NY

Zip Code: 12207

Business Phone: (518) 432-8000

Fax Number: (518) 432-0086

Email Address:

Type of Lobbying: NonProcurement

Level of Government you will lobby: State

Type of Lobbyist: Retained

Additional Lobbyists

[Help](#)

First Name	Last Name
CONSTANCE	CRANE
JAMES	CRANE
ANDREA	KOSIER
DENNIS	VACCO

Client Information

Client Business Name: SOUTHERN TIER ACQUISITION, LLC

Business Address 1: 125 PARK AVE

Business Address 2:

City: NEW YORK

State/Province: NY

Zip Code: 10017

Country: UNITED STATES

Business Phone: (212) 372-2400

Fax Number: (212) 372-2409

Chief Administrative Officer First Name: JEFFREY

Chief Administrative Officer Last Name: GURAL

Chief Administrative Officer Title: MANAGING MEMBER

— Third party information —

Name:

Business Address 1:

Business Address 2:

City:

State/Province:

Zip Code:

Country:

Business Phone:

Summary of Compensation and Reimbursed Expenses for this period:



**Compensation
(Current Period Only)**

\$20,000

**Reimbursed Expenses
(Current Period Only)**

\$513

Lobbying Expenses (Current Period Only)



A. Report in the aggregate all expenses less than or equal to \$75:

\$111

B. Report in the aggregate all expenses for salaries of non-lobbying employees: \$0

C. Itemize all expenses exceeding \$75:

I have no itemized expenses to report for this period.

Check box to agree with previous statement or enter expenses below

Paid to	Date	Purpose	Ad?	Social Event?	Amount
CAFE CAPRICCIO	08/01/2004	ENTERTAINMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$236

Paid to	Date	Purpose	Ad?	Social Event?	Amount
LRS	07/01/2004	LEGIS RETRIEVAL	<input type="checkbox"/>	<input type="checkbox"/>	\$83

Paid to	Date	Purpose	Ad?	Social Event?	Amount
LRS	08/01/2004	LEGIS RETRIEVAL	<input type="checkbox"/>	<input type="checkbox"/>	\$83

D. Total expenses for current period (A+B+C) : \$513

Subjects on which you lobbied:

RACING & WAGERING

Person, State Agency, Municipality or Legislative Body lobbied:

NYS SENATE ASSEMBLY EXECUTIVE, BRANCH

Bill, Rule, Regulation or Rate Numbers on which you lobbied:

Check if none lobbied

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

Check if none lobbied

Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

Check if none lobbied

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

Check if none lobbied

Actual Submission Date

Actual submission date:

Declaration



I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief.

(If form is being entered or was entered into system by NYTSCOL personnel, checked box below indicates that the Responsible Person signature was on the original paper form submitted to NYTSCOL).

Check box to agree with previous statement

Date: 11/15/2004

First Name: CONSTANCE K.

Last Name: CRANE

Comments: HC 09/15/04

Workflow

Date	User	Queue	Comment
11/15/2004	DSLUGHTER	Submitted	Form submitted by the user ...
12/15/2004	CIRISH	Approved	