



Interim Lobbying - Quarterly Expense Report

Received
 JAN 30 2013
 Philadelphia Board of Ethics

(Please Type or Print in Ink)			
<input type="checkbox"/> Check Box if AMENDMENT			
01 Today's Date (month/day/year) <i>1-30-13</i>	Year 2012	Quarter 4th	PLIS Number (Office Use Only)
Type of Filer			
<input checked="" type="checkbox"/> Principal	<input type="checkbox"/> Lobbyist	<input type="checkbox"/> Lobbying Firm	
02 FILER INFORMATION			
Name of Filer SugarHouse Casino		Email Address info@sugarhousecasino.com	Phone Number (267) 232-2000
Permanent Business Address 1080 N. Delaware Avenue, 8th floor	City Philadelphia	State PA	Zip Code 19125
03 LOBBYING EXPENDITURES			
<input type="checkbox"/> Total Lobbying Expenses did not exceed \$2,500 during this quarter. If you check this box, leave the rest of this section blank and move to Section 09.			
Total Expenditures for Direct Communication		\$ \$15,000.00	
Total Expenditures for Indirect Communication		\$ \$0.00	
Total Expenditures for Gifts, Hospitality, Transportation and Lodging		\$ \$0.00	
Total Lobbying Expenditures for the Quarter		\$ \$15,000.00	

04 LOBBYING CONDUCTED ON BEHALF OF THE PRINCIPAL – Direct Communication

Lobbying Category (Select from the list on page 9)	Specific Subject Matter (Issue, Bill Number)	Position Taken (Support/Oppose/Amend/Proposed/Other)	Name of City Official & Agency
Wagering/Gaming	Bill No. 121009	Monitor	City Council
Wagering/Gaming	City Council Activity	Monitor	City Council

05 LOBBYING CONDUCTED ON BEHALF OF THE PRINCIPAL – Indirect Communication

Lobbying Category (Select from the list on page 9)	Specific Subject Matter (Issue, Bill Number)	Position Taken (Support/Oppose/Amend/Proposed/Other)	Method of Communication	Description of Recipient Group
N/A				

06 CITY OFFICIALS/EMPLOYEES WHO RECEIVED GIFTS, HOSPITALITY, TRANSPORTATION OR LODGING

Name of Recipient City Official/Employee	Department & Position of Recipient City Official/Employee	Description of Item	Value of Item	Date	Place of Receipt	Name & Address of the Source of the Item
N/A						

07 REPAYMENTS TO PRINCIPALS FOR GIFTS, HOSPITALITY, TRANSPORTATION OR LODGING

Recipient of Item	Description of Item	Value of Item	Repayment Amount
N/A			

08 SOURCE(S) OF CONTRIBUTIONS TO PRINCIPAL

Name of Individual, Association, Corporation, Partnership, Business Trust or Other Business	Permanent Business Address	City, State, Zip	Daytime Telephone Number
N/A			

09 PRINCIPAL AFFIRMATION

By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report and that the information reported herein is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.

INDIVIDUAL AFFIRMING CONTENTS OF EXPENSE REPORT

NAME	PHONE NUMBER	EMAIL ADDRESS
Leigh N. Whitaker	(267) 232-2103	lwhitaker@sugarhousecasino.com
SIGNATURE		DATE
		1/28/2013

NAME OF PRINCIPAL:

SugarHouse Casino

YEAR:

2012

QUARTER:

4th

10 LOBBYIST OR LOBBYING FIRM AFFIRMATION - Use a separate sheet for each Lobbyist or Lobbying Firm.

Name of Lobbyist or Lobbying Firm	Email Address	Phone Number	
Leigh N. Whitaker	lwhitaker@sugarhousecasino.com	(267) 232-2103	
Permanent Business Address	City	State	Zip Code
1080 N. Delaware Avenue, 8th floor	Philadelphia	PA	19125

LOBBYIST OR LOBBYING FIRM AFFIRMATION

- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report and that the information reported herein is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report to the extent described in my statement which follows. I affirm that the information reported on this expense report of which I have knowledge is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I engaged in no lobbying activity for this principal during this expense report period. I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.

AUTHORIZED SIGNATURE

DATE

Leigh N. Whitaker

1-30-13

STATEMENT OF LIMITED KNOWLEDGE

NAME OF PRINCIPAL

SugarHouse Casino

YEAR:

2012

QUARTER:

4TH

10 LOBBYIST OR LOBBYING FIRM AFFIRMATION - Use a separate sheet for each Lobbyist or Lobbying Firm.

Name of Lobbyist or Lobbying Firm	Email Address	Phone Number	
S.K. Wojdak + Associates LP	info@wojdak.com	(215) 735-6660	
Permanent Business Address	City	State	Zip Code
200 South Broad Street, Suite 950	Philadelphia	PA	19102

LOBBYIST OR LOBBYING FIRM AFFIRMATION

- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report and that the information reported herein is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report to the extent described in my statement which follows. I affirm that the information reported on this expense report of which I have knowledge is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I engaged in no lobbying activity for this principal during this expense report period. I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.

AUTHORIZED SIGNATURE	DATE
	1-30-13

STATEMENT OF LIMITED KNOWLEDGE

Empty box for Statement of Limited Knowledge.

NAME OF PRINCIPAL:

SugarHouse Casino

YEAR:

2012

QUARTER:

4th

10 LOBBYIST OR LOBBYING FIRM AFFIRMATION - Use a separate sheet for each Lobbyist or Lobbying Firm.

Name of Lobbyist or Lobbying Firm	Email Address	Phone Number	
Stephen R. Wojdak	swojdak@wojdak.com	215-735-6660	
Permanent Business Address	City	State	Zip Code
200 South Broad Street, Suite 850	Philadelphia	PA	19102

LOBBYIST OR LOBBYING FIRM AFFIRMATION

- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report and that the information reported herein is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report to the extent described in my statement which follows. I affirm that the information reported on this expense report of which I have knowledge is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I engaged in no lobbying activity for this principal during this expense report period. I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.

AUTHORIZED SIGNATURE	DATE
	1-30-13

STATEMENT OF LIMITED KNOWLEDGE

NAME OF PRINCIPAL:

SugarHouse Casino

YEAR:

2012

QUARTER:

4th

10 LOBBYIST OR LOBBYING FIRM AFFIRMATION - Use a separate sheet for each Lobbyist or Lobbying Firm.

Name of Lobbyist or Lobbying Firm		Email Address	Phone Number	
John C. Hawkins		jhawkins@wojdak.com	215-735-6660	
Permanent Business Address		City	State	Zip Code
200 South Broad Street, Suite 850		Philadelphia	PA	19102

LOBBYIST OR LOBBYING FIRM AFFIRMATION

- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report and that the information reported herein is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report to the extent described in my statement which follows. I affirm that the information reported on this expense report of which I have knowledge is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I engaged in no lobbying activity for this principal during this expense report period. I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.

AUTHORIZED SIGNATURE

DATE



1-30-13

STATEMENT OF LIMITED KNOWLEDGE

Empty box for Statement of Limited Knowledge.

NAME OF PRINCIPAL:

Sugar House Casino

YEAR:

2012

QUARTER:

4th

10 LOBBYIST OR LOBBYING FIRM AFFIRMATION - Use a separate sheet for each Lobbyist or Lobbying Firm.

Name of Lobbyist or Lobbying Firm	Email Address	Phone Number	
S. R. Wojdak + Associates LP		(215) 735-6660	
Permanent Business Address	City	State	Zip Code
200 South Broad Street, Suite 850	Philadelphia	PA	19102

LOBBYIST OR LOBBYING FIRM AFFIRMATION

- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report and that the information reported herein is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I have actual knowledge of the contents of this expense report to the extent described in my statement which follows. I affirm that the information reported on this expense report of which I have knowledge is valid, accurate, and complete to the best of my knowledge. To the best of my knowledge at all times relevant to this quarterly expense reporting period, I have complied with the requirements of City Code §20-1205(5). I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.
- By affixing my signature to this expense report, I affirm that I engaged in no lobbying activity for this principal during this expense report period. I acknowledge that this affirmation is being made subject to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities). I consent to receive service of notices, other official mailings, or process at the address or email listed in this expense report.

AUTHORIZED SIGNATURE

DATE

Deth A. Brennan

1-30-13

STATEMENT OF LIMITED KNOWLEDGE