

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
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SECRETARY OF
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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name <u>New York State Credit Union League</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>PO Box 15118</u>			
3. Principal Place of Business (if different from line 2) City: <u>Albany</u> State/Zip (or Country) <u>Ny</u> <u>12212</u>			
4. Contact Name <u>Amy Hines Kramer</u>	Telephone <u>518 437 8122</u>	E-mail (optional) <u>akramer@nyscul.org</u>	5. Senate ID # <u>2921</u>
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # <u>34027</u>

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-De

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report ⇒ Termination Date _____

11. No Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6011 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature Amy Hines Kramer

Printed Name and Title Amy Hines Kramer^{vr} Governmental Affairs

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Registrant Name New York State Credit Union League Client Name _____

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code BAN (one per page)

16. Specific lobbying issues

Bankruptcy Reform, Credit union tax status, Regulatory Relief, financial literacy, Corporate credit unions, matricula

17. House(s) of Congress and Federal agencies contacted Check if None

*National Credit Union Administration
US House SBA
US Senate
US Treasury*

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
<i>Hines Kramer, Amy</i>	<i>N/A</i>
<i>Mellin, William</i>	
<i>Lanotte, Michael</i>	
<i>Halter, Cheryl</i>	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature *Amy Hines Kramer* Date _____

Printed Name and Title Amy Hines Kramer, VP, Governmental Affairs

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Registrant Name New York State Credit Union League Client Name _____

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address N/A

21. Client new principal place of business (if different from line 20)

City _____ State/Zip (or Country) _____

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)
Credit Union National Assn.	601 Pennsylvania Ave NW	Washington 20004

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
N/A			

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant or affiliated organization N/A

Signature [Handwritten Signature]

Date 6/29/05

Signature _____ Date _____

Printed Name and Title Amy Hines Kramer, VP Governmental Affairs

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