## **COUNTY OF NASSAU**

## LOBBYIST PERIODIC REPORT FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization as it appears on Lobbyist Registration and Disclosure Form:

Constantinople & Vallone Consulting LLC 233 Broadway, Suite 830 New York, NY 10279 (212) 393-6500 (List of lobbyist attached)

2.	Reporting Per	riod: Jar	uary 1 to March 31, 2017
(Janua	ry 1 to March 3	31; April	1 to May 31; June 1 to August 31; or September 1 to December 31)
lobbyi		earned o	6 below, where a lobbyist is required to file this report, any such r incurred any compensation or expenses for the period shall make
			or any compensation paid or owed to the lobbyist during the period Such amounts shall be detailed as to amount, to whom paid and for
	Amount \$22,500		Details Government Relations
4.	List below the	e cumula	tive total amounts earned to date for lobbying year:

-	or what purpose.	obbying. Such amounts shall be detailed as to amount, to whom paid
	Amount 0	Details None
	0	NOTE
6.	List below the sumu	lative total amounts expended to date for lobbying year:
0.	List below the cumu	native total amounts expended to date for loobying year.
	0	
and D	visclosure Form, provide List whether and	ough 10 below, you may attach a copy of your Lobbyist Registration ded the information has not changed.)  here the lobbyist(s)/lobbying organization is registered as a lobbyist
(e.g. 1	Nassau County, New Y	fork State):
	au County, Suffolk ( e of Representative	County, New York City, New York State,, Federal (Senate & s)
8.	Name, address and ist is retained, employ	telephone number of client(s) by whom, or on whose behalf, the
	GEO Group Inc.	ed of designated.
621 N	NW 53rd Street	
	Raton, FL 33487 999-5824)	
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I understand that copies of this form will be sent to the Nassau County Department of Information Technology ("IT") to be posted on the County's website.

I also understand that upon termination of retainer, employment or designation I must give written notice to the County Attorney within thirty (30) days of termination.

VERIFICATION: I certify that all statements made on this statement are true, correct and complete to the best of my knowledge and belief and I understand that the willful making of any false statement of material fact herein will subject me to the provisions of law relevant to the making and filing of false instruments and will render such statement null and void.

Dated: APTL 1920/7 Signed:

Print Name:

PerryCVallone

Title:

Partner

STATE OF NEW YORK

COUNTY OF NASSAU )

SS:

Sworn to before me this

Day of

**NOTARY PUBLIC** 

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NOTANY PUBLIC STATE IS NEW 1 48

No. 0100645175

Juditied in New 'Jrk

My Commission Expires 03/05/20

## Constantinople & Vallone Consulting LLC

STAFF LOBBYING FOR: THE GEO GROUP, INC.

Anthony Constantinople, Jr.
Peter Vallone Sr.
Perry Vallone
Anthony Constantinople III
Steve Williams
Robert Kevin Jones
Aycan Kaptaner
Jacob Potent
Carol Swift
Andrea Reres
Gema Garcia