Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0321087

Year of Registration: 2018

Reporting Period:

Mark One

January - February

March - April

May - June

July - August

September - October

November - December

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name:

RED LAND STRATEGY, INC. (FKA REDLAND

STRATEGIES, INC.)

Business Address 1:

519 EIGHTH AVENUE

Address 2:

16TH FLOOR

City:

NEW YORK

State:

NY

Zip Code:

10018

Business Phone:

516-582-7726

Fax Number:

Email Address:

SBALBONI@REDLANDSTRATEGIES.COM

Type of Lobbying:

Procurement

Level of Government Lobbied:

Both

Type of Lobbyist:

Retained

Additional Lobbyist Information

Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this bimonthly period, you must go to your "Lobbyist Registration Amendment form" in your "Lobbyist Registration Details Menu".

Client Information

Client Business Name:

PURE STORAGE, INC

Business Address 1:

650 CASTRO STREET

Address 2:

City:

MOUNTAIN VIEW

State:

NY

Zip Code:	94041	
Country:	US	
Business Phone:	(301) 717-9968	
Fax Number:	(301) 717-9968	
Chief Administrative Officer First Name:	KIMBERLY	
Chief Administrative Officer Last Name:	BRADBURY	
Chief Administrative Officer Title:	DIRECTOR PUBLIC SECTOR CONTRACTS	
	Third Party Information	
Name:		
Business Address 1:		
Address 2:		
City:		
State:		
Zip Code:		
Country:		
Business Phone:		
Summary of Compensation and Reimburse Compensation Reimbursed Ex (Current Period Only) (Current Period Only) 4000 0	penses	
Other Lobbying Expenses (Current Period	Only)	
A.Report in the aggregate all expenses le	ss than or equal to \$75:	0
B.Report in the aggregate all expenses fo	r salaries of non-lobbying employees :	0
C.Itemize all expenses exceeding \$75 : (?)	
I have no itemized expenses to report for		
Check box to agree with previous state	tement or enter expenses below	
		Тор
D. Total expenses for current period : \$ 0		
Subject Subjects on which you lobbied:		
IT PROCUREMENT OPPORTUNITIES		
Person Person, State Agency, Municipality or Legi	slative Body lobbied:	
NYS OFFICE OF INFORMATION TECHNOLOGY S	SERVICES, NYC COMPTROLLERS OFFICE	
Bill Bill, Rule, Regulation, Rate Number or brie intended introduction of legislation or a re	of description relative to the introduction or esolution on which you lobbied:	
No details were entered.		
Title		

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

No details were entered.

Number or Subject Matter

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

No details were entered.

Subject Matter

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

No details were entered.

Declaration

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

✓ Check box to agree with previous. statament

Date: 3/14/2018

First Name:

MICHAEL

Last Name:

BALBONI

Comments:

Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0321049 Year of Registration: 2018 Reporting Period: Mark One May - June January - February March - April July - August September - October November - December **Principal Lobbyist Information** (To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu). Principal Lobbyist Name: RED LAND STRATEGY, INC. (FKA REDLAND STRATEGIES, INC.) **Business Address 1:** 519 EIGHTH AVENUE Address 2: 16TH FLOOR **NEW YORK** City: NY State: Zip Code: 10018 **Business Phone:** 516-582-7726 Fax Number: Email Address: SBALBONI@REDLANDSTRATEGIES.COM Type of Lobbying: Both Both Level of Government Lobbied: Type of Lobbyist: Retained **Additional Lobbyist Information** Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

bimonthly period, you must go to your "Lobbyist!	
Amendment form" in your "Lobbyist Registration	Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this

First Name	Last Name
MICHAEL	BALBONI
JAMES	SHERRY

?

Client Information

Client Business Name:

ONEXIM SPORTS AND ENTERTAINMENT HOLDING USA, INC.

Business Address 1:

375 PARK AVENUE

Address 2:

SUITE 2608

City:

NEW YORK

State:

NY

Zip Code:	10152		
Country:	US		
Business Phone:	212-813-1155		
Fax Number:	212-813-1155		
Chief Administrative Officer First Name:	MAUREEN		
Chief Administrative Officer Last Name:	HANLON		
Chief Administrative Officer Title:	PRESIDENT		
	Third Party Information		
Name:			
Business Address 1:			
Address 2:			
City:			
State:			
Zip Code:			
Country:	US		
Business Phone:			
Compensation Reimbursed Ex (Current Period Only) (Current Period Only) 0	penses		
Other Lobbying Expenses (Current Period	Only)		
A.Report in the aggregate all expenses le	ss than or equal to \$75:	0	
B.Report in the aggregate all expenses for	or salaries of non-lobbying employees:	0	
C.Itemize all expenses exceeding \$75:			
I have no itemized expenses to report for	r this period.		
✓ Check box to agree with previous sta	tement or enter expenses below		
		Тор	
D. Total expenses for current period : \$ 0			
Subject Subjects on which you lobbied:			
ISSUES RELATED TO THE NASSAU COLISEUM			
Person Person, State Agency, Municipality or Legi	islative Body lobbied:		
NASSAU COUNTY LEGISLATURE, NYS DIVISIO COUNTY EXECUTIVE	N OF BUDGET, NYS LEGISLATURE, NASSAU		
Bill, Rule, Regulation, Rate Number or brid intended introduction of legislation or a re	ef description relative to the introduction or esolution on which you lobbied:		
No details were entered.			

Title

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

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Declaration

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

☐ Check pax to agree with previous

statement.

Date: 3/14/2018

First Name:

MICHAEL

Last Name:

BALBONI

Comments: