COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

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1. Name, address and telephone number of lobbyist(s)/lobbying organization as it appears or Lobbyist Registration and Disclosure Form:
Park Strategies, LLC; 101 Park Avenue, Suite 2506; New York, NY; 10178; (212) 883-5608
Alfonse D'Amato, Armand D'Amato, Christopher D'Amato, Jeffery Lovell, William McGahay, Ryan Moses, Joseph Rossi
2. Reporting Period: January 1 to March 31, 2020
(January 1 to March 31; April 1 to May 31; June 1 to August 31; or September 1 to December 31
(Note: for Sections 3 through 6 below, where a lobbyist is required to file this report, any such lobbyist that has not earned or incurred any compensation or expenses for the period shall make such a statement herein)
3. List below amounts for any compensation paid or owed to the lobbyist during the period for the purposes of lobbying. Such amounts shall be detailed as to amount, to whom paid and for what purpose.
Amount Details \$60,000.00 Compensation for government relations services - Client: Nassau Health Care
4. List below the cumulative total amounts earned to date for lobbying year: \$60,000.00

period fo		oses of lobbying.		ed by the lobbyisted as to amount, to	
	mount	N/A	Details		

\$0.00	N/A
add that to	
List below th	e cumulative total amounts expended to date for lobbying year:
\$0.00	

(In lieu of completing 7 through 10 below, you may attach a copy of your Lobbyist Registration and Disclosure Form, provided the information has not changed.)

7. List whether and where the lobbyist(s)/lobbying organization is registered as a lobbyist (e.g. Nassau County, New York State):

New York State - NYS Joint Commission on Public Ethics New York City - Clerk of NY, Lobbying Bureau US Senate US House of Representatives Nassau County Suffolk County

8. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated.

See attached

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9. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed, during the Reporting Period.
See attached
10. The name of persons, organizations or governmental entities before whom the lobbyist has lobbied during the period.
See attached .

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NASSAU COUNTY CLIENT & ACTIVITY LIST JAN/FEB/MARCH 2020

Juice Press, Inc.

110 East 591 h Street 281 h Floor, New York, NY 10022, (212) 507-9778

Lobbying Activity: No contact made this reporting period

Person(s) Lobbied: N/A

Microsoft

901 K Street NW, Washington D.C., 20001, (212) 263-5900 Lobbying Activity: No contact made this reporting period

Person(s) Lobbied: N/A

Nassau Health Care Corporation

2201 Hempstead Turnpike, East Meadow, NY 11445, (516) 572-2800

Lobbying Activity: obtaining state aid

Person(s) Lobbied: Helena Williams, Deputy County Executive Nassau County

Nassau Regional Off-Track Betting Corporation

139 Liberty Avenue, Mineola, NY 11501, (516) 572-2800 Lobbying Activity: No contact made this reporting period

Person(s) Lobbied: N/A

South Nassau Communities Hospital

a.One Healthy Way Oceanside, NY 11572 (516) 632-3093 Lobbying Activity: No contact made this reporting period

Person(s) Lobbied: N/A

Benchmark Senior Living

201 Jones Road, Suite 300 West, Waltham, MA 02451, (781) 489-7114

Lobbying Activity: No contact made this reporting period

Person(s) Lobbied: N/A

Tekni-Plex, Inc.

460 E Swedesford Road, Suite 3000, Wayne, PA 19087, (484) 831-3426

Lobbying Activity: No contact made this reporting period

Person(s) Lobbied: N/A

Nassau HUB Master

625 RXR Plaza, Uniondale, NY 11556 (516) 506-6777 Lobbying Activity: No contact made this reporting period

JANPerson(s) Lobbied: N/A

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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: 4/14/2020	Signed: Print Name: Title:	Christopher I EVP & Gen
STATE OF NEW YORK SS: COUNTY OF NASSAU Sworn to before me this /3 Day of	, 20 <u>]</u> .	
SEVEROF NEW YORK C. DEPARTMENT OF STAFF OF ANY PROTECTION OF ALL OF CORE. The Commission WESSIA CORE. OC., EDVINOR C		

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