\$1,150.04

COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

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

Carol B. Mark, 395 N. Service Road Floor 3, Melville, NY 11747, 631-755-5129 Michael J. Pressman, 395 N. Service Floor 3, Melville, NY 11747, 631-755-5143

2.	Reporting Perio	od: September 1 to December 31
		; April 1 to May 31; June 1 to August 31; or September 1 to December 31)
lobby	vist that has not ea a statement herein	hrough 6 below, where a lobbyist is required to file this report, any such urned or incurred any compensation or expenses for the period shall make the compensation paid or owed to the lobbyist during the period
٥.	List below amo	lints for any compensation paid or owed to the lophwist during the period
		bying. Such amounts shall be detailed as to amount, to whom paid and for
	e purposes of lobb	
	e purposes of lobb purpose.	bying. Such amounts shall be detailed as to amount, to whom paid and for
	e purposes of lobb purpose. Amount	bying. Such amounts shall be detailed as to amount, to whom paid and for Details
	e purposes of lobb purpose. Amount 182.68	Details Paid by JPMorgan Chase, Bank N.A. to Carol B. Mark for administration of new and existing contracts, with the County of Nassau
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5.

	Amount \$0	Details N/A				
	·					
6.	List below the cumulative total amounts expended to date for lobbying year:					
	\$0					
<u>7.</u>	. –	ovided the information has not changed.) I where the lobbyist(s)/lobbying organization is registered as a lobbyist w York State):				
		·				
Caro		ael Pressman are both registered in New York State, Nassau ounty as lobbyists.				
Caro						
Caro Cour	nty and Suffolk C					

List below amounts for any expenses expended or incurred by the lobbyist during the

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: 1/13/2021	Signed:	Carlo mar
	Print Name:	Carol B. Mark
	Title:	Executive Director
STATE OF NEW YORK) COUNTY OF NASSAU) Sworn to before me this 1340 Day of		NO. DIRECTOR IN SUFFOLK COUNTY COMM. EXP. 10/18/20 22 0