## COUNTY OF NASSAU

## LOBBYIST PERIODIC REPORT FORM

Name, address and telephone number of lobbyist(s)/lobbying organization as it appears on Lobbyist Registration and Disclosure Form:  Lobbyist Registration
2. Reporting Period: June 1 to Chaquest 31, 2016
2. Reporting Period: Line 1 to Changest 31, 2016  (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  Tone  Tone
Did not Tobby
4. List below the cumulative total amounts earned to date for lobbying year:

	Amount	Details
	Hone	
6.	List below the cumu	lative total amounts expended to date for lobbying year:
		None
and I	visclosure Form, provid	ough 10 below, you may attach a copy of your Lobbyist Registration led the information has not changed.)
7.	List whether and wh	here the lobbyist(s)/lobbying organization is registered as a lobbyist
(e.g. I	Nassau County, New Y	ork State):
	1100	16 10 0
	71 7	
	7 1 7	
		telephone number of client(s) by whom or on whose behalf the
	Name, address and to st is retained, employe	telephone number of client(s) by whom or on whose behalf the
	Name, address and to st is retained, employe Massau ( One E	telephone number of client(s) by whom, or on whose behalf, the dor designated.  Community College  Lucation Drive
	Name, address and to st is retained, employe Massau ( One E	telephone number of client(s) by whom, or on whose behalf, the
	Name, address and to st is retained, employe Massau ( One E	telephone number of client(s) by whom, or on whose behalf, the dor designated.  Community College  Lucation Drive
8. lobbyi	Name, address and to st is retained, employe Massau ( One E	telephone number of client(s) by whom, or on whose behalf, the dor designated.  Community College  Lucation Drive
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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.

10. The name of persons, organizations or governmental entities before whom the lobbyist has lobbied during the period.

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: Sept. 11, 2016		Signed: Daniel Mfi Print Name: DANIEL M F19 Title: President
STATE OF NEW YORK )  COUNTY OF NASSAU )  Sworn to before me this 11  Day of September	SS:	ROBERT M CAPACE Notary Public, State of New York No. 01CA6282632 Qualified in Nassau County , 2016Commission Expires May 28, 2017
NOTARY PUBLIC		