COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

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

Peter Weiss, Executive Director, 383 Madison Avenue, Floor 8, New York NY, (212) 272-2297
Frederick Putnam, Vice President, 383 Madison Avenue, Floor 8, New York NY, (212) 270-0757
Lindsey Brannon, Associate, 383 Madison Avenue, Floor 8, New York NY, (212) 270-0298

2. Re	porting Period: January 1 - March 31	, 2017
(January 1	to March 31; April 1 to May 31;	June 1 to August 31; or September 1 to December 31)
lobbyist th		ere a lobbyist is required to file this report, any such compensation or expenses for the period shall make
3. List below amounts for any compensation paid or owe for the purposes of lobbying. Such amounts shall be detailed a what purpose.		
An	nount	Details

\$0.00	
A 19	
4	7.00
To delete	

4.	List below the cumulative total amounts earned to date for lobbying year:
	\$0.00

		mounts for any expenses expended or incurred by the lobbyist during the ses of lobbying. Such amounts shall be detailed as to amount, to whom paid e.
	Amount \$0.00	Details
6.	List below th	e cumulative total amounts expended to date for lobbying year:
	\$0.00	
and D 7.	lisclosure Form List whether	g 7 through 10 below, you may attach a copy of your Lobbyist Registration, provided the information has not changed.) and where the lobbyist(s)/lobbying organization is registered as a lobbyist New York State):
		rederick Putnam are registered New York State lobbyists. Peter Putnam, and Lindsey Brannon are Nassau County lobbyists.
8. lobby		ss and telephone number of client(s) by whom, or on whose behalf, the employed or designated.
383 M Floor	Morgan Secur Madison Aven 8, New York 270-5906	ue,

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: 4-12-17

Signed: Peter E. Weiss

Peter E. Weiss

Managing Director

STATE OF NEW YORK

DOW YORK

SS:

COUNTY OF NASSAU

Sworn to before me this 12 Managing Director

MAUREEN C GERAGHTY

Notary Public - State of New York
NO. 01GE5024204

Qualified in New York County/
My Commission Expires 3/7/18

My Commission Expires 3/7/18