#### **COUNTY OF NASSAU**

#### LOBBYIST PERIODIC REPORT FORM

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

Constantinople & Vallone Consulting LLC 233 Broadway, Suite 830 New York, NY 10279 (212) 393-6500 (List of lobbyist attached)

2.	Reporting Period: June 1 to August 31				
(Janua	ry 1 to March 31	; April 1 to May 31; June 1 to August 31; or September 1 to December 31)			
lobbyi		brough 6 below, where a lobbyist is required to file this report, any such med or incurred any compensation or expenses for the period shall make ()			
		unts for any compensation paid or owed to the lobbyist during the period bying. Such amounts shall be detailed as to amount, to whom paid and for			
	Amount \$22,500	Details Government Relations			
4.	List below the o	cumulative total amounts earned to date for lobbying year:			

	Amount	Details
	0	None
6.	List below the c	umulative total amounts expended to date for lobbying year:
	0	
		through 10 below, you may attach a copy of your Lobbyist Registration
and L	Disclosure Form, p	rovided the information has not changed.)
7. (e.g. ]	List whether an Nassau County, No	d where the lobbyist(s)/lobbying organization is registered as a lobbyist ew York State):
	sau County, Suffo se of Representa	olk County, New York City, New York State, Federal (Senate & tives)
		· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
Hous	se of Representa  Name, address	· · · · · · · · · · · · · · · · · · ·
8. lobby	Name, address vist is retained, em GEO Group Inc.	and telephone number of client(s) by whom, or on whose behalf, the
8. lobby	Name, address	and telephone number of client(s) by whom, or on whose behalf, the ployed or designated.

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: 9/14/17	Signed: Print Name:	Jeen Pellone
	I IIIIt I Maille.	1 CRYCIATIONE
	Title:	PARTNER
STATE OF NEW YORK )		
1 la sold	SS:	
COUNTY OF NASSAU		
Sworn to before me this	14	
Day of Septender	, 20	
Puco	(in )	
NOTARY PUBLIC		
ANA D CORSINO HOTARY PUBLIC-STATE OF NI	.a 49	

No. 01C06256757
Qualified in New York County
Ny Commission Expires 03/25

## Constantinople & Vallone Consulting LLC

STAFF LOBBYING FOR: THE GEO GROUP, INC.

Anthony Constantinople, Jr.
Peter Vallone Sr.
Perry Vallone
Anthony Constantinople III
Steve Williams
Robert Kevin Jones
Lauren George
Aycan Kaptaner
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Gema Garcia

The Woolworth Building 233 Broadway, Suite 830, New York, NY 10279 Phone: 212-393-6500 Fax: 212-393-6501

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Reporting Perio	od: June 1 to August 31
anuary 1 to March 31	; April 1 to May 31; June 1 to August 31; or September 1 to December 31)
	hrough 6 below, where a lobbyist is required to file this report, any such armed or incurred any compensation or expenses for the period shall make a)
	bunts for any compensation paid or owed to the lobbyist during the period bying. Such amounts shall be detailed as to amount, to whom paid and for
Amount	Details
\$12,000	Government Relations
List below the	cumulative total amounts earned to date for lobbying year:

6. List below the cumulat  0  (In lieu of completing 7 througand Disclosure Form, provided 7. List whether and wher (e.g. Nassau County, New York Nassau County, Suffolk Co House of Representatives)	or any expenses expended or incurred by the lobbyist during the bying. Such amounts shall be detailed as to amount, to whom paid
6. List below the cumulate  O  (In lieu of completing 7 through and Disclosure Form, provided 7. List whether and where (e.g. Nassau County, New York Nassau County, Suffolk Co House of Representatives)  8. Name, address and te	Details
(In lieu of completing 7 through and Disclosure Form, provided 7. List whether and where (e.g. Nassau County, New York Nassau County, Suffolk Corona House of Representatives)  8. Name, address and te	None
(In lieu of completing 7 through and Disclosure Form, provided 7. List whether and where (e.g. Nassau County, New York Nassau County, Suffolk Corona House of Representatives)  8. Name, address and te	
(In lieu of completing 7 through and Disclosure Form, provided 7. List whether and where (e.g. Nassau County, New York Nassau County, Suffolk Corona House of Representatives)  8. Name, address and te	
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and Disclosure Form, provided  7. List whether and wher (e.g. Nassau County, New York  Nassau County, Suffolk Corhouse of Representatives)  8. Name, address and te	rive total amounts expended to date for lobbying year:
(e.g. Nassau County, New Yor Nassau County, Suffolk Co House of Representatives)  8. Name, address and te	gh 10 below, you may attach a copy of your Lobbyist Registration d the information has not changed.)
House of Representatives)  8. Name, address and te	re the lobbyist(s)/lobbying organization is registered as a lobbyist rk State):
	unty, New York City, New York State, Federal (Senate &
MP Engineers PC 40 Rector Street Suite 1020B New York, NY 10006	lephone number of client(s) by whom, or on whose behalf, the or designated.

Page 3 of 4
O Description of the second state of the second state of the National Country and the side
9. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed, during the Reporting Period.
None
None
10. The name of persons, organizations or governmental entities before whom the lobbyist has lobbied during the period.
None
None

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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: 9/14/17	Signed:	Very More
	Print Name:	Perry C VAllone
	Title:	Partner
STATE OF NEW YORK )		

(Liu York) COUNTY OF NASSAU)

SS:

Sworn to before me this \_\_\_\_/

, 20 /

**NOTARY PUBLIC** 

ANA D CORSINE
NOTARY PUBLIC-STATE OF NEW YORK
NO. 01CO6256757

Qualified in New York County

My Commission Expires 23(4)

# Constantinople & Vallone Consulting LLC

STAFF LOBBYING FOR: MP ENGINEERS, PC

Anthony Constantinople, Jr.
Peter Vallone Sr.
Perry Vallone
Anthony Constantinople III
Steve Williams
Robert Kevin Jones
Lauren George
Aycan Kaptaner
Jacob Potent
Carol Swift
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