## **Lobbyist Bi-Monthly Report**

Form Confirmation #: LBR0313135

Year of Registration:

2017

**Reporting Period:** 

Mark One

January - February

March - April

May - June

July - August

September -

November -

October

December

## **Principal Lobbyist Information**

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

**Principal Lobbyist Name:** 

RECLAIM NEW YORK

INITIATIVE

**Business Address 1:** 

597 5TH AVENUE

Address 2:

11TH FLOOR

City:

**NEW YORK** 

State:

NY

Zip Code:

10017

**Business Phone:** 

929-427-0760

Fax Number:

**Email Address:** 

BRANDON@RECLAIMNYNOW.ORG

Type of Lobbying:

NonProcurement

**Level of Government Lobbied:** 

Both

Type of Lobbyist:

Employed

# **Additional Lobbyist Information**

Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this bimonthly period, you must go to your "Lobbyist Registration Amendment

# form" in your "Lobbyist Registration Details Menu".

First Name	Last Name
MIKE	ARMSTRONG
JOHN	BYRNE
DOMENICK	COCCHIARA
BRANDON	MUIR
GEORGE	PHILLIPS



## **Client Information**

**Client Business Name:** 

RECLAIM NEW YORK INITIATIVE

**Business Address 1:** 

597 5TH AVENUE

Address 2:

7TH FLOOR

City:

NEW YORK

State:

NY

Zip Code:

10017

Country:

US

**Business Phone:** 

929-427-0760

Fax Number:

**Chief Administrative Officer** 

First Name:

BRANDON

**Chief Administrative Officer** 

act Names

Last Name:

MUIR

**Chief Administrative Officer** 

Title:

EXECUTIVE DIRECTOR

## **Third Party Information**

Name:

**Business Address 1:** 

Address 2:

City:

State:

Zip Code:

Country:

**Business Phone:** 

# Summary of Compensation and Reimbursed Expenses for this period

Compensation (Current Period Only)

Reimbursed Expenses 6897

## Other Lobbying Expenses (Current Period Only)

A.Report in the aggregate all expenses less than or equal to \$75

9

B.Report in the aggregate all expenses for salaries of non-lobbying employees :

3548

C.Itemize all expenses exceeding \$75:

I have no itemized expenses to report for this period.

Check box to agree with previous statement or enter expenses below

<b>PaidTo</b>	Date	Purpose	Ad? SocialEvent? Amount	
EMPIRE SOLUTIONS CONSULTING L.L.C	10/31/2017	CONSULTING	=	802
EMPIRE SOLUTIONS CONSULTING L.L.C.	09/29/2017	CONSULTING	4	1146
FACEBOOK	09/01/2017	ONLINE AD	4	732
FACEBOOK	09/06/2017	ONLINE AD	7	200
FACEBOOK	09/09/2017	ONLINE AD	4	170
FACEBOOK	09/12/2017	ONLINE AD	4	157
FACEBOOK	09/13/2017	ONLINE AD	4	374
FACEBOOK	10/02/2017	ONLINE AD	4	200
FACEBOOK	10/02/2017	ONLINE AD	4	1000
FACEBOOK	10/05/2017	ONLINE AD	1	450
FACEBOOK	10/16/2017	ONLINE AD	4	3000

Тор

D. Total expenses for current period: \$ 11788

## Subjects on which you lobbied:

NASSAU COUNTY BUDGET, SUFFOLK COUNTY BUDGET, COUNTY FEES, MOUNT VERNON BUDGET, UTICA ETHICS, CORTLAND COUNTY BUDGET, NYS INFRASTRUCTURE, NYS STATE BUDGET, NYS ENERGY, NYS OVERSIGHT & ETHICS, NYS ECONOMIC DEVELOPMENT, NYS TRASPORTATION, ULSTER COUNTY LICENSING

#### Person

Person, State Agency, Municipality or Legislative Body lobbied:

NYS ASSEMBLY, NYS SENATE, NYS EXECUTIVE CHAMBER, SUFFOLK COUNTY LEGISLATURE, SUFFOLK COUNTY EXECUTIVE, NASSAU COUNTY LEGISLATURE, NASSAU COUNTY EXECUTIVE, HEMPSTEAD TOWN COUNCIL, ULSTER COUNTY LEGISLATORS, MOUNT VERNON LEGISLATORS, UTICA LEGISLATORS

#### Bill

Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

CORTLAND COUNTY JAIL, SUFFOLK COUNTY BUDGET, NASSAU COUNTY BUDGET, HEMPSTEAD ETHICS BILL, ULSTER COUNTY LICENSING, UTICA TERM LIMITS, MOUNT VERNON BUDGET, NYS INFRASTRUCTURE

#### Title

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

#### **Number or Subject Matter**

Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

#### **Subject Matter**

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

#### Declaration

I declare under penalty of perjury that the information contained in this Bi-Monthly report is true, correct and complete to the best of my knowledge and belief.

Check box to agree with previous statement

**Date:** 12/4/2017

First Name: BRANDON Last Name: MUIR

Comments: