

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:

Josh Gold and Nicole Benincasa - Uber Technologies, Inc.
1455 Market Street, Suite 400, San Francisco, CA 94103
202-794-7387

Craig Johnson - Dentons US LLP (terminated effective 8/31/18)
1221 Avenue of the Americas
New York, NY 10020
212-905-8306

2. Reporting Period: June 1 - August 31, 2018

(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
\$23.50	Compensation paid to Josh Gold for lobbying services during the reporting period.
\$17,000.00	Compensation paid to Dentons US LLP for Craig Johnson's lobbying services during the reporting period.

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

Josh Gold - \$1,251.50; Nicole Benincasa - \$4,615.00; and, Craig Johnson - \$59,500.00

9. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed, during the Reporting Period.

Bikesharing.

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

Nassau County Taxi and Limousine Commission.

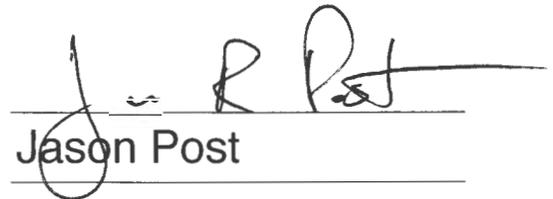
I understand that copies of this form will be sent to the Nassau County Department of Information Technology ("IT") to be posted on the County's website.

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 hereon 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: 09/17/2018

Signed:



Print Name:

Jason Post

Title:

Communications Director, East

STATE OF NEW YORK)
) §S:
COUNTY OF NASSAU)

Sworn to before me this 17th

Day of September, 2018.

Katherine Mason
NOTARY PUBLIC

KATHERINE MASON
NOTARY PUBLIC-STATE OF NEW YORK
NO 01MA6335989
QUALIFIED IN NEW YORK COUNTY
MY COMMISSION EXPIRES 01-25-2020