COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

1.	Name, add	ress and telephone	number of lo	bbyist(s)/lobbyin	g organization a	s it appears on
		ion and Disclosure				^ -

Robert A. Ungar Associates, Inc. 600 Old Country Road, Suite 330 Garden City, New York 11530

2.	Reporting Period	1: September 1 to December 31
(Janu	ary 1 to March 31;	April 1 to May 31; June 1 to August 31; or September 1 to December 31)
lobby		rough 6 below, where a lobbyist is required to file this report, any such ned or incurred any compensation or expenses for the period shall make
		ants for any compensation paid or owed to the lobbyist during the period ying. Such amounts shall be detailed as to amount, to whom paid and for
	Amount	Details See attached.
1 .	List below the cu	umulative total amounts earned to date for lobbying year:
	See attached.	

	List below amounts for the purposes of low what purpose.	for any expenses expended or incurred by the lobbyist during the bbying. Such amounts shall be detailed as to amount, to whom paid				
	Amount	Details				
		None.				
٠	-					
	·					
6.	List below the cumul	ative total amounts expended to date for lobbying year:				
0.		and to total amounts expended to date for loopying year.				
	None.					
		ugh 10 below, you may attach a copy of your Lobbyist Registration ed the information has not changed.)				
7. List whether and where the lobbyist(s)/lobbying organization is registered as a lobbyist (e.g. Nassau County, New York State):						
Rober	rt A. Ungar Associate	es, Inc. is registered to lobby with:				
Nassa		nmission on Public Ethics (JCOPE) the County Attorney Bureau				
•	st is retained, employe	telephone number of client(s) by whom, or on whose behalf, the d or designated.				
See attached.						

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: 10/2020	Signed: Print Name:	Melissa K. Gonzalez
	Title:	Administrative Manager
STATE OF NEW YORK) Albany) SS: COUNTY OF NASSAU)		
Sworn to before me this		
Day of		Micholas F. Antenucci, Jt. Motary Public, State of New York Reg. No. 02AN6263551 Qualified in Albany County Commission Expires June 11, 2020

8. Nassau Client Lobbying List 2019:

ACCENTURE, LLP

800 CONNECTICUT AVENUE NW SUITE 600 WASHINGTON, DC 20006 Phone: 202-533-1140

ATOS PUBLIC SAFETY, LLC

4851 REGENT BLVD IRVING, TX 75063 Phone: 914-881-3000

FIRE MARSHAL BENEVOLENT ASSOCIATION OF NASSAU COUNTY, INC.

PO BOX 853 HICKSVILLE, NY 11802 Phone: 516-903-2748

INTERMEDIX CORPORATION

401 NORTH MICHIGAN AVENUE SUITE 2700 CHICAGO, IL 60611 Phone: 732-710-9951

NASSAU COUNTY DEPUTY SHERIFF'S BENEVOLENT ASSOCIATION, INC.

POST OFFICE BOX 1778 MINEOLA, NY 11501 Phone: 516-499-7483

NASSAU COUNTY POLICE MEDIC ASSOCIATION, INC.

PO BOX 554 EAST MEADOW, NY 11554 Phone: 516-561-1156

NASSAU COUNTY SHERIFF'S CORRECTION OFFICERS BENEVOLENT ASSOCIATION

504 EAST MEADOW AVE EAST MEADOW, NY 11554 Phone: 516-937-7800