COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

1.	•	nd telephone number of lobbyist(s)/lobbying organization as it appears on ration and Disclosure Form:			
	Steve Moll/Islan 542 North Coun	nd Public Affairs try Road			
	St. James, NY 1				
	631-724-0017				
.	Daniela Danie	1. January 1 to Moush 21, 2020			
2.	, ,	d: January 1 to March 31, 2020			
(Janu	ary 1 to March 31;	April 1 to May 31; June 1 to August 31; or September 1 to December 31)			
lobby	vist that has not ear a statement herein)				
J.	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			
	\$18,000	Retainer			
	<u></u>				
	-				

4.	List below the cumulative total amounts earned to date for lobbying year:					
	\$18,000					
5.	List below amounts for any expenses expended or incurred by 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.					
	Amount0	Details				
6.	List below the cum0	ulative total amounts expended to date for lobbying year:				
		rough 10 below, you may attach a copy of your Lobbyist Registration ided the information has not changed.)				
7.		where the lobbyist(s)/lobbying organization is registered as a lobbyist y, New York State):				
8.		d telephone number of client(s) by whom, or on whose behalf, the employed or designated.				

	AT&T, Inc., 111 Washington Avenue, Albany NY 12207
	518-436-1089
	
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.	
10.	The name of persons, organizations or governmental entities before whom the lobbyist has lobbied during the period.

I understand that copies of this Technology ("IT") to be posted				ounty Department of Information
I also understand that up written notice to the County At	oon termina torney with	ation of ain thirt	retainer, emplo y (30) days of t	yment or designation I must give ermination.
complete to the best of my kno	wledge and t herein w	d belief ill subj	and I understared and I understared and I understar	nis statement are true, correct and and that the willful making of any provisions of law relevant to the ment null and void.
Dated: April 9, 2020			Signed:	Soll
•			Print Name:	Steve Moll
			Title:	President
STATE OF NEW YORK)			
)	SS:		
COUNTY OF Suffolk)			
Sworn to before me this	J-n		_	