COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

1.	Name, address a	and telephone	number of	of lobbyist(s)/lobbying	organization	as it	appears	or
Lobby	ist Registration a	nd Disclosure	Form:						

Craig M. Johnson, Esq. Dentons US 1221 Avenue of the Americas New York, NY 10020 212-905-8306

2. Reporting Period: April 1 to May 31, 2017	
(January 1 to March 31; April 1 to May 31; June 1 to August 31; or September 1 to December 1	mber 31)
(Note: for Sections 3 through 6 below, where a lobbyist is required to file this report, a lobbyist that has not earned or incurred any compensation or expenses for the period sh such a statement herein)	
3. List below amounts for any compensation paid or owed to the lobbyist during the for the purposes of lobbying. Such amounts shall be detailed as to amount, to whom paid what purpose.	
Amount Details	
\$8,500 Monthly Compensation - April 2017	
\$8,500 Monthly Compensation - May 2017	
4. List below the cumulative total amounts earned to date for lobbying year: \$17,000.00	

	or what purpose.	s of lobbying. Such amounts shall be detailed as to amount, to whom paid
	Amount 27.00	Details May Travel Expenses
6.	List below the \$27.00	cumulative total amounts expended to date for lobbying year:
		7 through 10 below, you may attach a copy of your Lobbyist Registration provided the information has not changed.)
7. (e.g. 1	List whether as Nassau County, N	nd where the lobbyist(s)/lobbying organization is registered as a lobbyist New York State):
	M. Johnson is Suffolk County	registered with New York State, New York City, Nassau County

8. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated.

See attached copy of 2017 Lobbyist Registration and Disclosure Form

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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: June 8, 2017	Signed: Print Name: Title:	Craig M. Johnson Principal
STATE OF NEW YORK) New York) COUNTY OF NASSAU)	SS:	
Sworn to before me this	, 2017.	

JANE A. MEYER

Notary Public, State of New York

No. 02ME5032840

Qualified in Kings County

Certificate Filed in New York County

Commission Expires October 25, 20