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:

Constantinople & Vallone Consulting LLC 233 Broadway, Suite 830 New York, NY 10279 (212) 393-6500 (List of lobbyist attached)

2.	Reporting Period	d: April 1 - May 31, 2017				
Janua	ary 1 to March 31;	April 1 to May 31; June 1 to August 31; or September 1 to December 31)				
obby	for Sections 3 that has not early statement herein	nrough 6 below, where a lobbyist is required to file this report, any such med or incurred any compensation or expenses for the period shall make)				
		unts for any compensation paid or owed to the lobbyist during the period bying. Such amounts shall be detailed as to amount, to whom paid and for				
	Amount \$15,000	Details Government Relations				
	Ψ10,000					
4.	List below the c	ist below the cumulative total amounts earned to date for lobbying year:				
	\$37,500					

	Amount 0	Details				
6.	List below the cumulative total amounts expended to date for lobbying year:					
	0					
		hrough 10 below, you may attach a copy of your Lobbyist Registration vided the information has not changed.)				
	List whether and	where the lobbyist(s)/lobbying organization is registered as a lobbyist				
7. (e.g.	Nassau County, Nev					
(e.g. Reg	Nassau County, Nev					
(e.g. Reg	Nassau County, Nev	v York State): owing: Nassau County, Suffolk County, New York City, New				

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None
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.
None

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: 6 13 17	Signed: Print Name: Title:	Perry					
STATE OF NEW YORK) New York) COUNTY OF NASSAU)							
Sworn to before me this							
Day of July Rua D. Co.	, 20_17.						
NOTARY PUBLIC							

NOTARY PUBLIC-STATE OF NEW

No. 01C06256757

Qualified in New York County

Vy Commission Expires 15/20

Constantinople & Vallone Consulting LLC

STAFF LOBBYING FOR: THE GEO GROUP, INC.

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