#### Lobbyist Bi-Monthly Report

Form Confirmation	n #: LBR03	07585

Year of Registration: 2017

Reporting Period:

Mark One

January - February

March - April

May - June

• July - August

September - October

November - December

#### **Principal Lobbyist Information**

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name:

RED LAND STRATEGY, INC. (FKA REDLAND

STRATEGIES, INC.)

**Business Address 1:** 

519 EIGHTH AVENUE

Address 2:

16TH FLOOR

City:

**NEW YORK** 

State:

NY

Zip Code:

10018

**Business Phone:** 

516-582-7726

Fax Number:

Email Address:

SBALBONI@REDLANDSTRATEGIES.COM

Type of Lobbying:

Both

Level of Government Lobbied:

Both

Type of Lobbyist:

Retained

# Additional Lobbyist Information

Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this bimonthly period, you must go to your "Lobbyist Registration Amendment form" in your "Lobbyist Registration Details Menu".

First Name	Last Name
MICHAEL.	BALBONI
JAMES	SHERRY

(?)

# Client Information

Client Business Name:

ONEXIM SPORTS AND ENTERTAINMENT HOLDING USA, INC.

Business Address 1:

375 PARK AVENUE

Address 2:

SUITE 2608

City:

NEW YORK

State:

NY

Zip Code:	10152	
Country:	US	
Business Phone:	212-813-1155	
Fax Number:	212-813-1155	
Chief Administrative Officer First Name:	MAUREEN	
Chief Administrative Officer Last Name:	HANLON	
Chief Administrative Officer Title:	PRESIDENT	
	Third Party Information	
Name:		
Business Address 1:		
Address 2:		
City:		
State:		
Zip Code:		
Country:	US	
Business Phone:		
Summary of Compensation and Reimburse	d Expenses for this period	
Compensation Reimbursed Ex	penses	
(Current Period Only) (Current Period 10000 0	Only)	
	No. 1. A.	
Other Lobbying Expenses (Current Period C		0
A.Report in the aggregate all expenses les		0
B.Report in the aggregate all expenses for		0
C.Itemize all expenses exceeding \$75:	)	
I have no itemized expenses to report for		
✓ Check box to agree with previous stat	ement or enter expenses below	
		Тор
		тор
<b>5 7</b> 1 1		
D. Total expenses for current period : \$ 0		
Subject Subjects on which you lobbied:		
Subjects on Minen you looked.		
ISSUES RELATED TO THE NASSAU COLISEUM		
Person		
Person, State Agency, Municipality or Legis	slative Body lobbied:	
NASSAU COUNTY LEGISLATURE, NASSAU COU	NTY EXECUTIVE	
Bill		
	f description relative to the introduction or solution on which you lobbied:	
No details were entered.		

Title

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

**Number or Subject Matter** 

Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

**Subject Matter** 

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

## Declaration

I declare under penalty of perjury that the information contained in this Bi-Monthly report is true, correct and complete to the best of my knowledge and belief.

✓ Check hox to agree with previous statement.

Date: 9/14/2017

Date: 3/14/201

First Name: MICHAEL

L Last Name:

BALBONI

Comments:

#### **Lobbyist Bi-Monthly Report**

Form Confirmation #: LBR0307581

Year of	Registration	:	2017
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Reporting Period:

Mark One

January - February

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• July - August

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STRATEGIES, INC.)

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16TH FLOOR

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State:

NY

Zip Code:

10018

**Business Phone:** 

516-582-7726

Fax Number:

**Email Address:** 

SBALBONI@REDLANDSTRATEGIES.COM

Type of Lobbying:

Procurement

Level of Government Lobbied: Both

Type of Lobbyist:

Retained

## Additional Lobbyist Information

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First Name	Last Name	?
MICHAEL	BALBONI	
JAMES	SHERRY	

#### **Client Information**

Client Business Name:

PURE STORAGE, INC

Business Address 1:

650 CASTRO STREET

Address 2:

City:

MOUNTAIN VIEW

State:

ΝY

Zip Code:	94041	
Country:	US	
Business Phone:	(301) 717-9968	
Fax Number:	(301) 717-9968	
Chief Administrative Officer First Name:	KIMBERLY	
Chief Administrative Officer Last Name:	BRADBURY	
Chief Administrative Officer Title:	DIRECTOR PUBLIC SECTOR CONTRACTS	
	Third Party Information	
Name:		
Business Address 1:		
Address 2:		
City:		
State:		
Zip Code:		
Country:		
Business Phone:		
Summary of Compensation and Reimbursed Ex Compensation Reimbursed Ex (Current Period Only) (Current Period 4000 0	penses	
Other Lobbying Expenses (Current Period	Only)	
A.Report in the aggregate all expenses le	ss than or equal to \$75 :	0
B.Report in the aggregate all expenses fo	r salaries of non-lobbying employees :	0
C.Itemize all expenses exceeding \$75 : (?	)	
I have no itemized expenses to report for		
✓ Check box to agree with previous sta	tement or enter expenses below	
		Тор
D. Total expenses for current period : \$ 0		
Subject Subjects on which you lobbied:		
IT PROCUREMENT OPPORTUNITIES		
Person Person, State Agency, Municipality or Legi	slative Body lobbied:	
NASSAU COUNTY OFFICE OF INFORMATION TO TECHNOLOGY, NYS COMPTROLLER OFFICE	ECHNOLOGY, NYS DEPT. OF INFORMATION	
Bill Bill, Rule, Regulation, Rate Number or brid	of description relative to the introduction or	
intended introduction of legislation or a re No details were entered.	solution on which you lobbied:	
110 details were circled.		

#### **Title**

\* . . . . .

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

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**Number or Subject Matter** 

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✓ Check box to agree with previous

statement

Date: 9/14/2017

First Name:

MICHAEL

Last Name:

BALBONI

Comments: