such a statement herein)

COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

1.	Name, address	and telephone	number of	lobbyist(s)	/lobbying	organization	as it	appears	10
Lobby	ist Registration	and Disclosure	Form:						

Josh Gold Uber Technologies, Inc. 1455 Market Street, Suite 400, San Francisco, CA 94103 415-986-2104

2.	Reporting Period: April 1 - May 31, 2017
(Januar	ry 1 to March 31; April 1 to May 31; June 1 to August 31; or September 1 to December 31)
	for Sections 3 through 6 below, where a lobbyist is required to file this report, any such at that has not earned or incurred any compensation or expenses for the period shall make

3. 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.

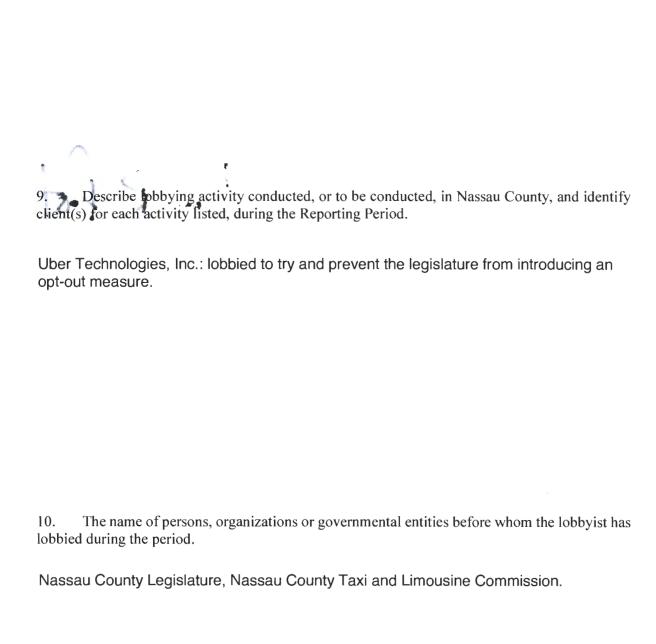
Amount	Details
\$1,335.00	Compensation paid to Josh Gold for lobbying services during the reporting period.

4.	List below the cumulative total amounts earned to date for lobbying year:
	\$1,335.00

	Amount \$0.00	Details No expenses for the reporting period.
6.	List below the c	umulative total amounts expended to date for lobbying year:
	\$0.00	
		7 through 10 below, you may attach a copy of your Lobbyist Registration rovided the information has not changed.)
and L		
7.	List whether an Nassau County, N	d where the lobbyist(s)/lobbying organization is registered as a lobbyist ew York State):
7. (e.g.	Nassau County, N	* * * * * * * * * * * * * * * * * * * *
7. (e.g.	Nassau County, N	ew York State):
7. (e.g.	Nassau County, N	ew York State):

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

Uber Technologies, Inc. 1455 Market Street, Suite 400, San Francisco, CA 94103 415-986-2104



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: 6/15/2017	Signed: Print Name: Title:	Jason Post Communications Director, East
STATE OF NEW YORK) COUNTY OF NASSAU) Sworn to before me this		
Day of June Katherine Mason NOTARY PUBLIC	, 20 <u>17</u> .	KATHERINE MASON NOTARY PUBLIC-STATE OF NEW YORK NO 01 MA6335989 QUALIFIED IN NEW YORK COUNTY MY COMMISSION EXPIRES 01 25-2020