## 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:

Praxis Public Relations, Inc. 69 Chichester Road Huntington, NY 11743 631.423.8300

Lobbyist: Paul J. Tonna, President

2.	Reporting Period:	January 1- March 31
(Janua	ary 1 to March 31; Ap	oril 1 to May 31; June 1 to August 31; or September 1 to December 31)
lobbyi		igh 6 below, where a lobbyist is required to file this report, any such d or incurred any compensation or expenses for the period shall make
		s for any compensation paid or owed to the lobbyist during the period g. Such amounts shall be detailed as to amount, to whom paid and for
	Amount	Details
	\$1,000/month	Paid to Praxis from Questus Capital LLC
		Provide governmental consulting services and networking with relevant entities
		<del></del>
		<u> </u>
4.	List below the cum	ulative total amounts earned to date for lobbying year:
	.# A	,000

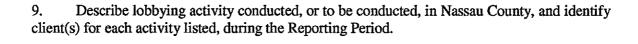
5.

~		for any expenses expended or incurred by the lobbyist during the bbying. Such amounts shall be detailed as to amount, to whom paid
	Amount	NEA NO Details
6.	_	lative total amounts expended to date for lobbying year:
		ough 10 below, you may attach a copy of your Lobbyist Registration led the information has not changed.)
7. (e.g. N	List whether and wh Nassau County, New Y	nere the lobbyist(s)/lobbying organization is registered as a lobbyist ork State):
Nassa	u County, Suffolk County, l	New York State

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

Questus Capital LLC 7600 Jericho Tpke, Suite 11797 Woodbury, NY 516.771.5100

Jan 1- March 31



Provide governmental consulting services and networking with relevant municipalities

10. The name of persons, organizations or governmental entities before whom the lobbyist has lobbied during the period.

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: 4/5/21

Signed:

Title:

Paul J. Tonna

Print Name:

President

STATE OF NEW YORK

SS:

**COUNTY OF NASSAU** 

Sworn to before me this \_

DEBORAH YOUNG Notary Public, State of New York No. 01YO6299699 Qualified in Nassau County Commission Expires 03/24/2022