## 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: Turl 1 - August 31 (January 1 to March 31; April 1 to May 31; June 1 to August 31; or September 1 to December 31)
(Note: for Sections 3 through 6 below, where a lobbyist is required to file this report, any such lobbyist that has not earned or incurred any compensation or expenses for the period shall make such a statement herein)
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  \$2,000/month Paid to Praxis from Equinor Wind USA LLC  Provide governmental consulting services and networking with relevant entities
4. List below the cumulative total amounts earned to date for lobbying year:  5 16,000

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11	at halow the aumulati	ive total amounts expended to date for lobbying year:
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		gh 10 below, you may attach a copy of your Lobbyist Registration to the information has not changed.)

Nassau County, Suffolk County, New York State

(e.g. Nassau County, New York State):

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

Equinor Wind US LLC 120 Ridge Road, Suite 3E01 Stamford, CT 06902 (203) 978-6900 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: 9/5/21

Signed:

Paul J. Tonna

Print Name:

Title: President

STATE OF NEW YORK

COUNTY OF NASSAU

SAU )

Sworn to before me this

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SS:

Sworm to before me time

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NOTARY PUBLIC

DEBORAH YOUNG
Notary Public, State of New York
No. 01Y08299699
Qualified in Nesseu County
Commission Evolution 1972427722