## COUNTY OF NASSAU

## LOBBYIST PERIODIC REPORT FORM

1.	Name,	address	and telephone	number	of lobbyist	(s)/lobbying	organization	as it a	ppears of	nc
Lobbyi	ist Regi	stration	and Disclosure	Form:						

OSTROFF ASSOCIATES, 150 STATE STREET, ALBANY NY 12207, 518-436-6202 DIANA ERLICH, EVAN SULLIVAN, CHRISTOPHER BOMBARDIER

	<u>-</u>	d: APRIL 1, 2020-MAY 31, 2020					
(Janu	ary I to March 31	; April 1 to May 31; June 1 to August 31; or September 1 to December 31)					
lobby	: for Sections 3 th ist that has not ea a statement herein	hrough 6 below, where a lobbyist is required to file this report, any such much or incurred any compensation or expenses for the period shall make					
	List below amounts for any compensation paid or owed to the lobbyist during the period e purposes of lobbying. Such amounts shall be detailed as to amount, to whom paid and for purpose.						
	Amount	Details					
	Amount \$0	Details compensation paid for state lobbying. No compensation specific to nassau county.					

perio			detailed as to amount, to whom paid
	Amount	Details N/A	
			I I
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6.	List below the cumu	lative total amounts expended to	date for lobbying year:
	\$0		, , , , , , , , , , , , , , , , , , ,
(In lie and D	eu of completing 7 thro Pisclosure Form, provid	ough 10 below, you may attach a led the information has not chang	copy of your Hobbyist Registration
7. (e.g. 1	List whether and wh Nassau County, New Y		anization is registered as a lobbyist
NEW	/ YORK STATE, NE\	W YORK CITY, NASSAU COL	JNTY :
			· ·
			†
			† • •
8. lobbyi	Name, address and ist is retained, employe		by whom, or on whose behalf, the
1330 Temp	rican Traffic Solutions West Southern Averone, Arizona 85282	•	# 4 4 4
(400)	596-4673		

IAC 555 West 18th Street, New York, NY 10011 212-314-7334

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.

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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: 06/12/2020			Signed:	Tin Waterhouse		
			Print Name:	Erin Waterhouse		
			Title:	Director of Compliance		
				1 1 3		
STATE OF NEW YORK	)	SS:		1		
COUNTY OF NASSAU	)	55.		i s		
Sworn to before me this				f 1		
Day of			, 20	}		
				} }		
NOTARY PUBLIC			<del></del>	r 1		