

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:

Gotham Government Relations & Communications, LLC
1399 Franklin Ave, Garden City, NY 11530
Phone: (516) 880-8170
1 David Schwartz, 2 Bradley Gerstman, 3 Diane Cahill

2. Reporting Period: January 1, 2016 - March 31, 2016

(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
<u>\$4,500</u>	<u>Paid by Just Kids for services rendered by all lobbyists for months</u> <u>January, February, March</u>
<u>\$12,000</u>	<u>Paid by Nassau County Museum of Art for services rendered by all lobbyists</u> <u>for months January, February, March</u>
<u>\$12,000</u>	<u>Paid by Optotrafic for services rendered by all lobbyists for months</u> <u>January, February, March</u>
<u>\$15,000</u>	<u>Paid by SLCD for services rendered by all lobbyists for months</u> <u>January, February, March</u>
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<u> </u>	<u> </u>

4. List below the cumulative total amounts earned to date for lobbying year:

\$46,500.00 For the period of January - March 2016

5. List below amounts for any expenses expended or incurred by 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
\$0	No Expenses Incurred
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. List below the cumulative total amounts expended to date for lobbying year:

\$0 _____

(In lieu of completing 7 through 10 below, you may attach a copy of your Lobbyist Registration and Disclosure Form, provided the information has not changed.)

7. List whether and where the lobbyist(s)/lobbying organization is registered as a lobbyist (e.g. Nassau County, New York State):

Yes - With New York State & Nassau County

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

1. Cam Held (Just Kids): (631)924-0008, 35 Longwood Rd, Middle Island, NY 11953
2. Nassau County Museum of Art: (516)484-9338, 1 Museum Dr, Roslyn, NY 11576
3. Optotraffic: (301)459-2603, 9418 Annapolis Rd, Lanham, MD 20706
4. School for Language & Communications (SLCD) (Multistate)
(516)609-2000, 100 Glen Cove Ave, Glen Cove, NY 11542

9. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed, during the Reporting Period.

1. Procurement & Contracts: Just Kids, Nassau County Museum of Art, Optotraffic
2. Legislative: Optotraffic
3. Program Approval: SLCD
4. General Relationship Building: All of the above

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

Nassau County Legislature
Nassau County Executive

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: 04/15/2016

Signed: _____



Print Name: _____

David Schwartz

Title: _____

Partner

STATE OF NEW YORK)

COUNTY OF NASSAU)

SS:

Sworn to before me this 15

Day of April, 20 16

NOTARY PUBLIC

