

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
<u>NONE</u>	<u>NONE</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

NONE

(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):

Nassau County
Suffolk County
State of New York

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

Retained by National Strategies, LLC on behalf of TASER International

National Strategies, LLC
1400 Eye Street, NW, Suite 900
Washington, DC 20005-3978
Tel: 202-349-7024

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

Procurement activity for TASER International with the Nassau County Police Department, Nassau County Sheriff, Nassau County Executive, and Nassau County Legislature.

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

Telephone discussions with staff at the Nassau County Police Department.

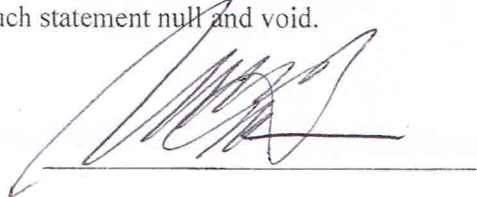
I understand that copies of this form will be sent to the Nassau County Department of Information Technology ("IT") to be posted on the County's website.

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: 9/26/2016

Signed:



Print Name:

Mark J. Grossman

Title:

Principal, Mark Grossman Public Relations

STATE OF NEW YORK)
 Suffolk) SS:
COUNTY OF NASSAU)

Sworn to before me this 26

Day of September, 2016


NOTARY PUBLIC

Donna M. Ferrizz
Notary Public - State of New York
Qualified in Suffolk County
Commission #: 01FE6280502
My commission expires April 29, 2017