

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

0

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>0</u> | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

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):

Registered in New York State & Suffolk County

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

AT&T, 111 Washington Avenue,
Albany NY, 12207
518-436-1089

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

Met with counsel regarding Clerk item #129-17, Ordinance 35-2017 An ordinance to regulate county rights-of-way in relation to utilities.

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

Christopher Ostuni, Majority Counsel, Nassau County Legislature

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: Sm September ~~12~~ 2017

Signed: 

Print Name: Steve Moll

Title: President

STATE OF NEW YORK)

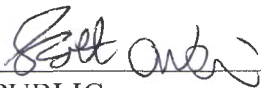
) SS:

COUNTY OF NASSAU)

Suffolk

Sworn to before me this 12th

Day of September, 2017.


NOTARY PUBLIC

