

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:

Marc S. Alessi
Shelter Rock Strategies LLC
300 Garden City Plaza, 5th Floor
Garden City, NY 11530
(516) 294-4000

2. Reporting Period: 2017 - June 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
\$5,000.00	Client -American Security - Paid in full to July 2017 for lobbying services; August 2017 outstanding
\$10,500.00	Client -First Hartford - Paid in full to Shelter Rock for lobbying services

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

\$45,500.00

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

First Hartford - Provide government relation services for the development of CVS/ Pharmacy and Cumberland Farms locations; and, American Security - Sale of the company's life button panic alarms and general security systems and monitoring

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

Nassau County Legislature, Nassau County Executive's Office, Nassau BOCES, Long Island School Districts.

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: 9/11/17

Signed:



Print Name:

Marc S. Alessi


Title:

Member

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

Sworn to before me this 15th

Day of September, 2017.



NOTARY PUBLIC

Lauren D. Kanter
Notary Public, State of New York
No.02KA6215118
Qualified in Bronx County 12/2/17
My Commission Expires 12/2/17