

Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0321945

Year of Registration : 2018

Reporting Period:

Mark One

- January - February
 March - April
 May - June
 July - August
 September - October
 November - December

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: RECLAIM NEW YORK INITIATIVE
Business Address 1: 597 5TH AVENUE
Address 2: 11TH FLOOR
City: NEW YORK
State: NY
Zip Code: 10017
Business Phone: 929-427-0760
Fax Number:
Email Address: BRANDON@RECLAIMNYNOW.ORG
Type of Lobbying: NonProcurement
Level of Government Lobbied: Both
Type of Lobbyist: Employed

Additional Lobbyist Information

Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this bimonthly period, you must go to your "Lobbyist Registration Amendment form" in your "Lobbyist Registration Details Menu".

First Name	Last Name
MIKE	ARMSTRONG
JOHN	BYRNE
DOMENICK	COCCHIARA
BRANDON	MUIR
GEORGE	PHILLIPS
MICHAEL	WATT



Client Information

Client Business Name: RECLAIM NEW YORK INITIATIVE
Business Address 1: 597 5TH AVENUE
Address 2: 7TH FLOOR
City: NEW YORK
State: NY
Zip Code: 10017
Country: US
Business Phone: 929-427-0760
Fax Number:
Chief Administrative Officer First Name: BRANDON
Chief Administrative Officer Last Name: MUIR
Chief Administrative Officer Title: EXECUTIVE DIRECTOR

Third Party Information

Name:
Business Address 1:
Address 2:
City:
State:
Zip Code:
Country:
Business Phone:

Summary of Compensation and Reimbursed Expenses for this period

Compensation (Current Period Only)	Reimbursed Expenses (Current Period Only)
5135	0

Other Lobbying Expenses (Current Period Only)

- A. Report in the aggregate all expenses less than or equal to \$75 : 83
- B. Report in the aggregate all expenses for salaries of non-lobbying employees : 1767

C. Itemize all expenses exceeding \$75 : ?

I have no itemized expenses to report for this period.

Check box to agree with previous statement or enter expenses below

PaidTo	Date	Purpose	Ad? SocialEvent?	Amount
EMPIRE SOLUTIONS CONSULTING L.L.C.	01/31/2018	CONSULTING		1675
EMPIRE SOLUTIONS L.L.C.	02/28/2018	CONSULTING		893
FACEBOOK	02/07/2018	ONLINE AD		328
FACEBOOK	02/08/2018	ONLINE AD		823
FACEBOOK	02/09/2018	ONLINE AD		83

FACEBOOK	02/13/2018	ONLINE AD	<input type="checkbox"/>	<input type="checkbox"/>	604
FACEBOOK	02/19/2018	ONLINE AD	<input type="checkbox"/>	<input type="checkbox"/>	598
FACEBOOK	02/19/2018	ONLINE AD	<input type="checkbox"/>	<input type="checkbox"/>	119
FACEBOOK	02/23/2018	ONLINE AD	<input type="checkbox"/>	<input type="checkbox"/>	159
FACEBOOK	02/23/2018	ONLINE AD	<input type="checkbox"/>	<input type="checkbox"/>	161

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D. Total expenses for current period : \$ 7293

Subject

Subjects on which you lobbied:

NYC BUDGET, DOL SCHEDULING, NYC PENSION DIVESTMENT, ETHICS REFORM, NYS BUDGET, NYS CONGESTION PRICING, DECOUPLING BILL, HEMPSTEAD INCOME CAP, ELMIRA CITY BUDGET,

Person

Person, State Agency, Municipality or Legislative Body lobbied:

NYS ASSEMBLY, NYS SENATE, NYS EXECUTIVE CHAMBER, ELMIRA CITY COUNCIL, HEMPSTEAD TOWN COUNCIL & SUPERVISOR; NYC MAYOR;

Bill

Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

S. 7509; A. 9509, A. 9061A

Title

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter

Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Declaration

I declare under penalty of perjury that the information contained in this Bi-

Monthly report is true, correct and complete to the best of my knowledge and belief.

I agree with previous statement.

Date : 3/21/2018

First Name: BRANDON Last Name: MUIR

Comments:

NASSAU CO. ATTORNEY
2018 MAR 28 - PM 10 12