

Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0327304

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: RED LAND STRATEGY, INC. (FKA REDLAND STRATEGIES, INC.)

Business Address 1: 519 EIGHTH AVENUE

Address 2: 16TH FLOOR

City: NEW YORK

State: NY

Zip Code: 10018

Business Phone: 516-582-7726

Fax Number:

Email Address: SBALBONI@REDLANDSTRATEGIES.COM

Type of Lobbying: Procurement

Level of Government Lobbied: Both

Type of Lobbyist: Retained

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
MICHAEL	BALBONI
JAMES	SHERRY

?

Client Information

Client Business Name: PURE STORAGE, INC

Business Address 1: 650 CASTRO STREET

Address 2:

City: MOUNTAIN VIEW

State: NY

Zip Code: 94041
 Country: US
 Business Phone: (301) 717-9968
 Fax Number: (301) 717-9968
 Chief Administrative Officer First Name: KIMBERLY
 Chief Administrative Officer Last Name: BRADBURY
 Chief Administrative Officer Title: DIRECTOR PUBLIC SECTOR CONTRACTS

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)
4000	0

Other Lobbying Expenses (Current Period Only)

A. Report in the aggregate all expenses less than or equal to \$75 : 0
 B. Report in the aggregate all expenses for salaries of non-lobbying employees : 0

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

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D. Total expenses for current period : \$ 0

Subject

Subjects on which you lobbied:

IT PROCUREMENT OPPORTUNITIES

Person

Person, State Agency, Municipality or Legislative Body lobbied:

NYS OFFICE OF INFORMATION TECHNOLOGY SERVICES

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:

No details were entered.

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.

Check box to agree with previous statement

Date : 6/29/2018

First Name: MICHAEL Last Name: BALBONI

Comments:

Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0327295

Year of Registration : 2018

Reporting Period:

Mark One

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Address 2: 16TH FLOOR

City: NEW YORK

State: NY

Zip Code: 10018

Business Phone: 516-582-7726

Fax Number:

Email Address: SBALBONI@REDLANDSTRATEGIES.COM

Type of Lobbying: Both

Level of Government Lobbied: Both

Type of Lobbyist: Retained

Additional Lobbyist Information

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First Name	Last Name
MICHAEL	BALBONI
JAMES	SHERRY

**Client Information**

Client Business Name: ONEXIM SPORTS AND ENTERTAINMENT HOLDING USA, INC.

Business Address 1: 375 PARK AVENUE

Address 2: SUITE 2608

City: NEW YORK

State: NY

Zip Code: 10152
 Country: US
 Business Phone: 212-813-1155
 Fax Number: 212-813-1155
 Chief Administrative Officer First Name: MAUREEN
 Chief Administrative Officer Last Name: HANLON
 Chief Administrative Officer Title: PRESIDENT

Third Party Information

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

Summary of Compensation and Reimbursed Expenses for this period

Compensation (Current Period Only)	Reimbursed Expenses (Current Period Only)
10000	0

Other Lobbying Expenses (Current Period Only)

A. Report in the aggregate all expenses less than or equal to \$75 : 0
 B. Report in the aggregate all expenses for salaries of non-lobbying employees : 0

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

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D. Total expenses for current period : \$ 0

Subject

Subjects on which you lobbied:

ISSUES RELATED TO THE NASSAU COLISEUM

Person

Person, State Agency, Municipality or Legislative Body lobbied:

NASSAU COUNTY LEGISLATURE, NYS LEGISLATURE

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:

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Title

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Check box to agree with previous statement

Date : 6/29/2018

First Name: MICHAEL Last Name: BALBONI

Comments:
