



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>Not Applicable</u>	<u>Not Applicable</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

Not Applicable

(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):

New York State (JCOPE), New York City (NYC Clerk), Nassau County, Suffolk County (Legislature)

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

Sensys Gatso USA, Inc.  
900 Cummings Center, Suite 222-T  
Beverly, MA 01915  
(978) 922-7294

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

Transportation - General  
Transportation - Safety  
Red Light Cameras  
Speed Cameras

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

NYS Senate, NYS Assembly, City of Albany, City of Buffalo, Westchester County, NYC Council, Nassau County Legislature, Suffolk 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:   09/18/2020  

Signed:

\_\_\_\_\_  
**Kaitlyn Cahill**

Print Name:

\_\_\_\_\_  
Director of Operations - Cahill Strategies, LLC

Title:

STATE OF NEW YORK    )  
                                  )  
COUNTY OF NASSAU    )

SS:

Sworn to before me this \_\_\_\_\_

Day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC