



County of Nassau
Lobbyist Client Annual Report
For the reporting year 20__

1. Name, address and telephone number of client utilizing a lobbyist:

2. Name, address and telephone number of each lobbyist retained, employed, or designated by client:

3. A description of the subject or subjects on which each lobbyist retained, employed or designated by such client has lobbied:

6. List below the cumulative total amounts expended or incurred on lobbying throughout the prior year:

\$0

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: _____

Signed: Beth Finkel

Print Name: Beth Finkel

Title: State Director, AARP New York

STATE OF NEW YORK)

COUNTY OF ^{NY} ~~NASSAU~~) SS:

Sworn to before me this 18

Day of Jan, 2022

[Signature]

NOTARY PUBLIC

