4.

\$0.00

COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

1.	Name, address a	ind telephone ni	umber c	of lobbyist(s	s)/lobbying	organization	as it appears	on
Lobby	ist Registration as	nd Disclosure F	orm:			-		

Robert Sabo Oracle America, Inc. c/o 2350 Kerner Blvd., Suite 250 San Rafael, CA 94901 415-389-6800

2. Reporting Period:	September 1, 2016 through December 31, 2016
(January 1 to March 31; A	April 1 to May 31; June 1 to August 31; or September 1 to December 31)
(Note: for Sections 3 throlobbyist that has not earn such a statement herein)	ough 6 below, where a lobbyist is required to file this report, any such ed or incurred any compensation or expenses for the period shall make
3. List below amoun for the purposes of lobbyi what purpose.	ts for any compensation paid or owed to the lobbyist during the period ng. Such amounts shall be detailed as to amount, to whom paid and for
Amount \$0.00	Details Robert Sabo

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

Amount	Details
\$0.00	N/A
ist below the co	umulative total amounts expended to date for lobbying year:
	11

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

(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):

Within New York, Oracle America, Inc. is registered as a lobbyist with New York State, New York City and Nassau County.

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

Oracle America, Inc. c/o 2350 Kerner Blvd., Suite 250 San Rafael, CA 94901 415-389-6800

NONE

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:	7-12		
			Print Name:	Jason D. Kaune		
			Title:	Designated Agent		
STATE OF NEW YORK COUNTY OF NASSAU Sworn to before me this)	SS:				
Day of			, 20			
NOTARY PUBLIC California Giral						

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✓ See Attached Document (Notary to cross or See Statement Below (Lines 1–6 to be com	ut lines 1–6 below) pleted only by document signer[s], <i>not</i> Notary)
1	
2	
3	
4	
5	
Signature of Document Signer No. 1	Signature of Document Signer No. 2 (if any)
	rtificate verifies only the identity of the individual who signed the not the truthfulness, accuracy, or validity of that document.
State of California County of	Subscribed and sworn to (or affirmed) before me on this
Seal Place Notary Seal Above	OPTIONAL —
	this information can deter alteration of the document or f this form to an unintended document.
	Document Date:
Number of Pages: Signer(s) Other Than	
	INotary.org • 1-800-US NOTARY (1-800-876-6827) Item #5910