

BHF (02/2016)

Business History Form

In addition to the submission of bids/proposals, as applicable, each bidder/proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the bid/proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks. (USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS). 1) Bidder's/Proposer's Legal Name: SERVISAIR 2) Address of Place of Business: 2150 SHITHTOWN AVE RONKOHANY. List all other business addresses used within last five years: 3) Mailing Address (if different):_ Phone: 631-737-3778 Does the business own or rent its facilities? RENT 4) Dun and Bradstreet number: 15991156 5) Federal I.D. Number: 10x 10 tt 11 - 3319570 Sole Proprietorship ____ Partnership ____ The bidder/proposer is a (check one); Corporation Other (Describe) 7) Does this business share office space, staff, or equipment expenses with any other business? Yes ___ No V If Yes, please provide details: ____ 8) Does this business control one or more other businesses? Yes \(\subseteq \text{No_details:} \) AVIATION SERVICES WORLDWIDE I If Yes, please provide TROM THIS LOCATION 9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business? Yes ___ No __ If Yes, provide details._ 10) Has the bidder/proposer ever had a bond or surety cancelled or forfelded, or a contract with Nassau County or any other government entity terminated? Yes ____ No ___ If Yes, state the name of bonding agency, (If a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract). _ HH:1 9 01 YAM dlos

11) Has the bide If Yes, state	der/proposer, during the past seven years, been declared bankrupt? Yes No
business, busine	live years, has this business and/or any of its owners and/or officers and/or any affiliated een the subject of a criminal investigation and/or a civil anti-trust investigation by any see or local prosecuting or investigative agency? And/or, in the past 5 years, have any or officer of any affiliated business been the subject of a criminal investigation and/or a st investigation by any federal, state or local prosecuting or investigative agency, where ligation was related to activities performed at, for, or on behalf of an affiliated business. If Yes, provide details for each such investigation.
business be federal, state of an affilia but not limited	5 years, has this business and/or any of its owners and/or officers and/or any affiliated een the subject of an investigation by any government agency, including but not limited to ite and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer ted business been the subject of an investigation by any government agency, including ited to federal, state and local regulatory agencies, for matters pertaining to that a position at or relationship to an affiliated business. Yes No If Yes, provide each such investigation.
either befo	urrent or former director, owner or officer or managerial employee of this business had, ore or during such person's employment, or since such employment if the charges to events that allegedly occurred during the time of employment by the submitting and allegedly related to the conduct of that business: a) Any felony charge pending? No Yes If Yes, provide details for each such charge
	b) Any misdemeanor charge pending? No Yes If Yes, provide details for each such charge
	c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? No Yes If Yes, provide details for each such conviction
	d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor? No Yes If Yes, provide details for each such conviction
	e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions? No Yes If Yes, provide details for each such

	occurrence.			
15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? No Yes; If Yes, provide details for each such instance.				
applicable and sewer detailed re	st (5) tax years, has this business falled to file any required tax returns or falled to pay any federal, state or local taxes or other assessed charges, including but not limited to water charges? No Yes If Yes, provide details for each such year. Provide a sponse to all questions checked 'YES'. If you need more space, photocopy the e page and attach it to the questionnaire.			
Provide a deta	ailed response to all questions checked "YES". If you need more space, photocopy the age and attach it to the questionnaire.			
17) Conflict of	Interest:			
a)	Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, se expressly state "No conflict exists."			
pioa	(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.			
	(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.			
	(ill) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau-Bounty.			
b)	Please describe procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for war firm both future. ALLEMI OYERS ARE REQUIRED TO REPORT TO THE CONFLICT FAILURETO DO SO WILL RESULT IN DISCIPLIANT ACTION UP TO 4 INCLUDING TORMANTON. ALL EMPLOYEES ARE REQUIRED TO CONFLICT OF INTEREST FORM.			

A.	 Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified. 				
	Should the proposer be other than an Individual, the Proposal MUST include:				
	1)	Date of formation; July 1952			
	ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner; SEE attachment				
	in Name, address and position of all officers and directors of the company				
	iv)	State of incorporation (if applicable); NA			
	v)	The number of employees in the firm; 20,000			
	vi) Annual revenue of firm; see attach ment				
	vii) Summary of relevant accomplishments MANAGEMENT Suffolk + Orange (1)				
	viii)	Summary of relevant accomplishments MANAgement Suffolk + Orange City Copies of all state and local licenses and permits. N/A			
B.	Indicat	re number of years in business. 62 yrs			
C,	Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.				
D.	 Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work. 				
	company Department of Health Sorvices Suffork Ory				
	Contact Person Ellen Ellis				
	Addres	55 Laser Cr. Hauppauge, n.y.			
	City/St	ate			
	Teleph	one <u>631-863-3130</u>			
	Fax#	631-853-2300			
	E-Mail	Address NA			
Minne	,				

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer/bidder. Answers must be typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID! PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

	Principal Name NONE
	Date of birth
	Home address
	City/state/zip
	Business address
	City/state/zip
	Telephone
	Other present address(es)
	City/state/zip
	Telephone
	List of other addresses and telephone numbers attached
2.	Positions held in submitting business and starting date of each (check all applicable) President/ _/ _ Treasurer/ _/ ON
3.	Do you have an equity interest in the business submitting the questionnaire? NO YES If Yes, provide details.
4.	Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire? NOYES If Yes, provide details.
5.	Within the past 3 years, have you been a principal owner or officer of any business or not-for-profit organization other than the one submitting the questionnaire? NO YES; If Yes, provide details.
6.	Has any governmental entity awarded any contracts to a business of organization listed in Section 5 in the past 3 years while you were a principal owner or officer? NO YES If Yes, provide details.

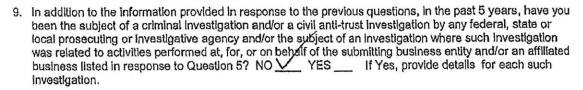
7.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency.

Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7.	In the p Section	ast (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in 5 in which you have been a principal owner or officer:
	a.	Been debarred by any government agency from entering into contracts with that agency? NO YES If Yes, provide details for each such instance.
	b.	Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? NO YES If Yes, provide details for each such instance.
	c.	Been denied the award of a contract and/or the opportunity to vid on a contract, including, but not limited to, failure to meet pre-qualification standards? NO YES If Yes, provide details for each such instance.
	d.	Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? NO YES If Yes, provide details for each such instance.
8.	and/or portlor Initiate proces respon attach	any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings of more than 7 years ago and/or is any such business now the subject of any pending bankruptcy edings, whenever initiated? If 'Yes', provide details for each such instance. (Provide a detailed use to all questions checked "YES". If you need more space, photocopy the appropriate page and it to the questionnaire.)
	a)	Is there any felony charge pending against you? NO YES If Yes, provide details for each such charge.
		Is there any misdemeanor charge pending against you? NO YES If Yes, provide details for each such charge.
	c)	Is there any administrative charge pending against you? NO YES If Yes, provide details for each such charge.
	d)	In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? NO YES If Yes, provide details for each such conviction.
	e)	In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? NO VES If Yes, provide details for each such conviction.
	f)	In the past 5 years, have you been found in violation of any administrative or statutory charges? NO YES If Yes, provide details for each such occurrence.

PQF (02/2016)



- 10. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not imited to federal, state, and local regulatory agencies while you were a principal owner or officer? NO YES ______ If Yes; provide details for each such investigation.
- 11. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? NO YES If Yes; provide details for each such instance.
- 12. For the past 5 tax years, have you falled to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? NO YES ____ If Yes, provide details for each such year.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID/PROPOSAL OR FUTURE BIDS/PROPOSALS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

I, LICHAEL MADD: , being duly sworn, state that I have read and understand all the Items contained in the foregoing pages of this questionnaire and the following pages of attachments; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this questionnaire and before the execution of the contract; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the Information supplied in this questionnaire as additional inducement to enter into a contract with the submitting business entity.

Sworn to before me this B day of MANCh 2016

ROBERT S. McGREGOR, JR. NOTARY PUBLIC, STATE OF NEW YORK NO. 01MC4830057

QUALIFIED IN SUFFOLK COUNTY COMMISSION EXPIRES OCT. 31, 2017

Name of submitting business

MICHARA MADDI Printhatne

Signature

DIRECTOR

318116

Date

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.				
Should the proposer be other than an individual, the Proposal MUST include:				
i) Date of formation: July 1952				
ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner; SEE attack				
iii) Name, address and position of all officers and directors of the company;				
iv) State of incorporation (if applicable); $N \mathcal{H}$				
v) The number of employees in the firm; 20,000				
vi) Applied revenue of firm: See a Mac h Men T				
vii) Summary of relevant accomplishments Management Suffork + Orange	Yry.			
viii) Copies of all state and local licenses and permits. N				
B. Indicate number of years in business. 62 yrs				
C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.				
D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to				
company Department of Health Services Suffork Uly				
Contact Person Cited Citis				
Address 50 Laser Cr. Hauppauge, n.y.				
City/State				
Telephone <u>631-853-3130</u>				
Fax#63]-853-2300				
E-Mail Address N				

Allest 20 to the War Donald
company Orange County Doot of Health
Contact Person Neila Wanten
Address 124 Main St
City/State Gospen 41.4. 17.483
Telephone 845-291-2333
Fax# 845-291-2418
E-Mail Address N
V
·
company Suffork County Dept of Social Services
company Suffork County Dept of Social Services Contact Person Janet Draffin
Contact Person Janet Draffin
Contact Person Janet Draffin Address 3085 Vetenans Hwy-
Contact Person Janet Draffin Address 3083 VETERANS HWY- City/State Konthonthoma 9 4 11779
Contact Person Janet Draffin Address 3085 Vetenans Huy- City/State KronKonKong 9 4 11779 Telephone 631-831-938



Attachment A

Swissport SA, LLC

Page 1 of 1

as of 6/9/2015

Names and respective addresses of Officers and Directors:

Title	Name	#, Street, City, State, Zip Code
OFFICERS		
President and Chief Executive Officer	Joseph J. Phelan	Swissport SA, LLC 45025 Aviation Drive, Suite 350 Dulles, VA 20166
Chief Financial Officer	Dany Nasr	Same address as above
Vice President	Gregory B. Reeves Frank Clemente Steven A. Gomez Frank Mena Roger Larreur Mark Norris Michael Kilchherr	Same address as above " " " " " " "
Treasurer	Sean M. Klinge	Same address as above
Secretary	Dawn Elliott Oakley	Same address as above .
DIRECTORS		
Director	Joseph J. Phelan Dany Nasr	Swissport SA, LLC 45025 Aviation Drive, Suite 350 Dulles, VA 20166



b) Qualifications:

Company History and Transportation Experience

The SA organization is a wholly owned subsidiary of The Derichebourgh Group. Besides our Aviation and Transportation Services we are also experts in the Environmental and Business Services Fields. The Derichebourgh Group employ's 40,000 employees in 30 countries with sales in excess of \$4.2 billion.

Our services are designed and developed to enable our customers to concentrate on their core business.

The SA Group is one of the world's leading providers in Aviation and Transportation Services. SA has 21,000 employees serve the needs of 700 customers operating in 167 locations, in 30 countries with sales in excess of \$820 million.

"Servisair has a safety driven philosophy backed by a strong corporate operational support team with a proven track record in delivering cost effective solutions."

The SA Group was created in 1950, then known as the British Merchant Shipping Company, and provided dock work and shipping labor at various harbors throughout England. As industry evolved, SA was incorporated in 1954 in Manchester, England and entered the aviation industry. A leading French business group, Penauille Polyservices, acquired SA in May 1999. In addition to its aviation interests, Penauille is involved in a number of other businesses including facility services, security and engineering services. In order to expand its operations to service the largest aviation market in the world, the United States, SA USA was incorporated in 1999 under the laws of the State of Delaware. Tristar Aviation of Dallas, Texas, and Global/AGSL in Cleveland, Ohio were the initial acquisitions forming Servisair USA.

In February 1990, GlobeGround was founded as Lufthansa Airport and Ground Services; GmbH (LAGS) was in six (6) airports in five (5) countries. In December of 1998, LAGS was re-branded as GlobeGround GmbH. In March of 1999, to expand its operations into North America, GlobeGround purchased Hudson General Corporation (now known as GlobeGround North America LLC), who was providing aviation services to over twenty (20) airports in North America. GlobeGround North America LLC (Hudson) was incorporated in Delaware in 1961. In July of 2001, GlobeGround was purchased by Penauille Polyservices to compliment Penauille's previous purchase of Servisair Plc.



To take advantage of greater operating and overhead efficiencies, SA and GlobeGround were combined into one company. The new name of the combined company was Penauille Servisair (PS) d/b/a Servisair (SA). Then in 2007 SA became a part of the Derichebourgh Group.

SA provides a wide range of services to the aviation industry, including:

passenger services - aircraft fueling

load control & dispatch
 de-icing

aircraft ground handling - snow removal

cargo handling
 ground transportation

- aircraft cleaning - facility services

- executive lounges - representation/supervision

exterior aircraft washing

Globally SA operates in 167 locations in 35 countries.

EUROPE

Austria Belgium Denmark

Finland France Germany

Ireland Italy Latvia

Lithuania Netherlands Norway

Portugal Romania Russia

Spain UK/CI



AFRICA

Mauritius

Namibia

Nigeria

ASIA/ MIDDLE EAST

China

Egypt

India

Israel

Philippines

Singapore

South Korea

Thailand

NORTH AMERICA

Canada

Trinidad & Tobago USA

SOUTH AMERICA

Chile

Ecuador

Peru



Major Accomplishments for the Nassau County Preschool Program

Since being awarded the Nassau County Preschool Transportation Management Contract in June 1986, SA has worked closely with the Department to develop a safe, reliable and cost effective transportation system for the children utilizing these services. During the above period, there have been numerous major accomplishments and improvements in the transportation program that should be noted. Those accomplishments and improvements are as follows:

- In 2010-2011 School Year implemented efficiencies that result in a cost saving of \$1,725,356.60
- Active Member of the Department of Health Office of Children with Special Needs (DOH/OCSN) Transportation Committee.
- Currently working with the Provider School to adjust bell times that would allow for shared busing to facilities with close geographic proximity
- In 2010, developed and now provides a PMR System that now has over 300 participants.
- In 2010 implemented recommendation resulting in a cost saving over \$950,000.00.
- In 2009, negotiated reduction in pricing with contractor.
- In 1999 the New York Coalition for Transportation Safety conducted a survey of the Nassau County Transportation for Children with Disabilities. Their findings were that Nassau County provides an excellent transportation system for the 0-5 year old population with special needs "An excellent example of a system that works".
- Development, revisions and distribution of a multi lingual parent transportation information pamphlet for each school year. This has been emulated and is now being used by many other counties through out the State of New York.
- Driver and Matron Orientation and Recognition Day. This program was designed as part of the driver and matron training program to further enhance their abilities in assisting the children that they transport.
- Development of bid specifications, which included new vehicles and exclusive use of equipment. This assisted the County in significantly upgrading the condition of the Preschool Transportation Program in 1987.



- Development of bid specifications, which included a zonal arrangement to increase competition and lower prices. This resulted in a saving to Nassau County of over 20% in the transportation cost beginning in September 1997.
- Mandated drug and alcohol screening for both drivers and matrons. This
 previously was not mandatory in the transporter bid specifications.
- Fingerprinting of all matrons. Previously to SA's transporter bid specifications this was not a requirement for matrons (only for drivers).
- National advertising of bus bids specifications. This had tremendously enhanced competition from vendors outside the local area.
- Developments of student emergency drop off program.
- Development of transportation weather emergency notification system.
 Which includes a contract with Metro Weather Services to provide weather alerts and forecasts for SA's Preschool Transportation Area. This service alerts SA in the event of a possible weather emergency and includes condition updates until the event is over.
- Developed notification system to ensure that children are not left unattended on vehicles.
- 2-Way Radio communication between SA's office and road inspector vehicles, drivers and contractors facilities.
- All SA's inspection cars are fully equipped with GPS enable routing systems.
- SA has developed special training for drivers and driver assistants in the area of early detection and reporting of child abuse and the procedures for dealing with infectious diseases.
- SA will continue to schedule and supervise parent workshops at the Provider Schools. SA will review transportation policies and procedures with parents to ensure their children's transportation needs are met.
- SA will continue to conduct cost-effective studies of the facilities session times and their relationship to transportation cost. SA will work with the Department, Provider Schools, and the Transporters to adapt session times for better utilization of routes creating a more cost-effective program.
- SA's staff has over 26 years experience with the Nassau County Preschool Program for Children with Special Needs.

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

L.	Name of the Entity: SERVISAIR, LLC.			
	Address: 45025 AVATION DRIVE SUITE 350			
	City, State and Zip Code: Du LLES, VA Z0166			
2,	Entity's Vendor Identification Number: TAXID# 11-3319570			
3,	Type of Business:Public CorpPartnershipJoint Venture			
	Ltd. Liability Co Closely Held Corp Other (specify)			
of Joi	List names and addresses of all principals; that is, all individuals serving on the Board of tors or comparable body, all partners and limited partners, all corporate officers, all parties at Ventures, and all members and officers of limited liability companies (attach additional is if necessary):			
	SEE ATTACHMENT A SWISSBORT SALLC.			
-				
	List names and addresses of all shareholders, members, or partners of the firm. If the sholder is not an individual, list the individual shareholdres/partners/members. If a Publicly Corporation include a copy of the 10K in lieu of completing this section.			
	WE DO Not Have Shape Holders			

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(b) Describe lobbying activity of each lobbyist. See page 4 of 4 for a complete description of lobbying activities.
(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):
•
8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.
The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.
Dated: 9 25 2015 Signed:
Print Name: MICHAEL MADDI
Title: DIRECTOR U.S.



Attachment A

Swiasport SA, LLC

as of 9/15/2016

Page 1 of 1

Names and respective addresses of Officers and Directors:

Title	Name	#, Street, City, State, Zip Code
OFFICERS		
President and Chief Executive Officer	Joseph J. Phelan	Swissport SA, LLC 45025 Aviation Orive, Suite 350 Dulles, VA 20166
Chief Financial Officer	Dany Nasr	Same address as above
Vice President	Steven A. Gomeż Frank Clemente Frank Mena Roger Larreur Mark Norris Michael Kilchherr	Same address as above
Treasurer	Sean M. Klinge	Same address as above
Secretary	Dawn Elliott Oakley	Same address as above
DIRECTORS		
Director	Joseph J. Phelan Dany Nasr	Swiesport SA, LLC 45025 Aviation Drive, Suite 350 Dulies, VA 20166

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The term lobbying shall mean any attempt to influence; any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.



COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator? If yes, to what campaign committee?	Page 1
N/A - NO	
2. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts. The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate. The undersigned further certifies and affirms that the contribution(s) to the campaign committee identified above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration. Vendor: Vendor: Print Name: Pri	