COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization as it appears on Lobbyist Registration and Disclosure Form:

Constantinople & Vallone Consulting LLC 233 Broadway Suite 830 New York, NY 10279 212-393-6500

2.	Reporting Period: A	pril 1 to May 31, 2019	
(Janua	ary 1 to March 31; Ap	ril 1 to May 31; June 1 to August 31; or September 1 to Decemb	oer 31)
lobbyi		gh 6 below, where a lobbyist is required to file this report, an or incurred any compensation or expenses for the period shall	-
		for any compensation paid or owed to the lobbyist during the g. Such amounts shall be detailed as to amount, to whom paid a	
	Amount	Details	
	\$10,000	Government Relations	
4.	List below the cumu	lative total amounts earned to date for lobbying year:	
	\$25,000		

5.	List below	amounts	for any	expenses	expended	or	incurred	by t	he lobby	ist	during	the
period	for the purp	oses of lo	bbying.	Such amo	ounts shall	be	detailed	as to	amount,	to	whom	paid
and for	r what purpo	ise.										

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

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(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 City, New York State, Nassau County, Suffolk County, Federal (Senate & House)

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

The GEO Group, Inc. 4995 Technology Way Boca Raton, FL 33431

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: 47 (4)	Signed: Print Name: Title:	Perry Vallone Perry Vallone Promer
STATE OF NEW YORK) COUNTY OF NASSAU Sworn to before me this Day of June	: , 20 _1 &	
NOTARY PUBLIC		

ROY WALLACE

COTARY PUBLIC-STATE OF NEW YORK

No. 02WA5027406

Qualified in New York County

My Commission Expires 5-2-202

Constantinople & Vallone Consulting LLC

STAFF LOBBYING FOR: The GEO Group, Inc.

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