COUNTY OF NASSAU

LOBBYIST PERIODIC REPORT FORM

l. Lobby	Name, address and to vist Registration and D	elephone number of lobbyist(s)/lobbying organization Disclosure Form:	as it appears on
Miller	nnial Strategies, LLC	C - Jeff Guillot	
315 N	Main St., 2nd Floor, I	Huntington, NY 11743	
(585)	261-2671		
2.	Reporting Period: A	pril 1 to May 31	
(Janua	ary 1 to March 31; Apr	ril 1 to May 31; June 1 to August 31; or September 1 t	o December 31)
lobbyi such a	ist that has not earned a statement herein)	gh 6 below, where a lobbyist is required to file this representation or expenses for the pe	riod shall make
		for any compensation paid or owed to the lobbyist dog. Such amounts shall be detailed as to amount, to wh	
	Amount \$10,000	Details Paid to Millennial Strategies for Government Affairs counsel in Nassau Co	ounty, Suffolk County,
	/	and New York State	
			1
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4.	List below the cumu	lative total amounts earned to date for lobbying year:	
	\$10,000		

	Amount	Details			
	N/A	No expenses were expended or incurred during this period.			
6.	List below the cumulative total amounts expended to date for lobbying year:				
	N/A				
		through 10 below, you may attach a copy of you rovided the information has not changed.)	r Lobbyist Registration		
7.	List whether an	d where the lobbyist(s)/lobbying organization is	registered as a lobbyist		
(e.g.	Nassau County, No				
Nas	sau County, Suffe	olk County, New York State			
8. lobb		and telephone number of client(s) by whom, or ployed or designated.	on whose behalf, the		
JUU	L Labs, Inc.				
560	· · · · · · , - · · · ·				
) 680-5169				
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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: 7-16-19

Signed:

Print Name:

Title:

STATE OF NEW YORK

SS:

COUNTY OF NASSAU

Sworn to before me this

Day of

HOPE J KINNEY

NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01KI635803 Qualified in Suffolk County

Commission Expires May 1, 2021

Registration No. 01 K16358084 NOTARY PUBLIC, STATE OF NEW YORK

HOPE J KINNEY

Commission Expires May 1, 2021

Qualified in Suffolk County