

5. 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 and for what purpose.

Amount	Details
\$192.31	Pro-rated compensation paid to staff for lobbying support, Kojo Asiedu
\$480.00	Pro-rated compensation paid to staff for lobbying support, Amanda Amaro
\$531.25	Pro-rated compensation paid to staff for lobbying support, Eashvar Venkatraman
\$1,442.30	Pro-rated compensation paid to staff for lobbying support, Arthur Staub

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

\$3,703.16

(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):

Paula Dagen and Michael Colton are registered with New York State and New York City.

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

Wells Fargo Bank, N.A.
1300 SW 5th Ave., 11th Floor
MAC P6101-110
Portland, OR 97201
503-937-9452

9. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed, during the Reporting Period.

Discuss refunding opportunities


10. The name of persons, organizations or governmental entities before whom the lobbyist has lobbied during the period.

Office of Management and Budget

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.

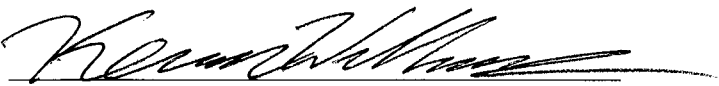
I also understand that upon termination of retainer, employment or designation I must give written notice to the County Attorney within thirty (30) days of termination.

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: 1/13/2020 Signed: 
 Print Name: Richard Soules
 Title: Compliance Manager

Oregon
 STATE OF ~~NEW YORK~~)
Multnomah) SS:
 COUNTY OF ~~NASSAU~~)

Sworn to before me this 13
 Day of January, 2020.


 NOTARY PUBLIC

