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<th>OUTSTANDING ITEM</th>
<th>BIMONTHLY PERIOD</th>
<th>REGISTRATION FEE PAYMENT SUBMITTED</th>
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TOTAL OUTSTANDING BIMONTHLY REPORTS 10
TOTAL OUTSTANDING REGISTRATION FEES 22
TOTAL OUTSTANDING CONTRACTS 8
TOTAL OUTSTANDING ITEMS 40
Lobbyist Registration Form

Form Confirmation #: LR00030189

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name Last Name
KEITH D. SERNICK

Client Information

Client Business Name: TAX LIEN ADVISORS LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Country: US
Business Phone: 516-794-9100
Fax Number:
Chief Administrative Officer First Name: CHARLES
Chief Administrative Officer Last Name: BARREDO
Chief Administrative Officer Title: MANAGING MEMBER

Third party information

Name: AJM CAPITAL II
Business Address 1: 2 COOPER SQUARE
Address 2: SUITE C
City: NEW YORK
State: NY
**Zip Code:** 10003  
**Country:** US  
**Business Phone:** 212-677-5788

**Client Business Nature**
Select the category that best describes the nature of the Client's business:

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

**Subject**
Subjects on which you expect to lobby:

No details were entered.

**Person**
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

No details were entered.

**Bill**
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

**Title**
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

**Number or Subject Matter**
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

**Subject Matter**
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

**Contract/Authorizations**
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

**Contract / Authorization Start Date (MM/DD/YYYY):** 1/18/2013

**Contract / Authorization End Date (MM/DD/YYYY):** 12/31/2013

Check here if mailing:
Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 2/24/2013
Actual submission date: _______________

First Name: MARLA Last Name: BIER
Comments: ____________________________________________________________

Fees
Please Check one of the following: ☐
Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
☐ check/ wire

Check Status: REJ
Check No: 2006

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00025114

Year of Registration: 2011-2012

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 146 STATE STREET
Address 2: SUITE 101-M
City: ALBANY
State: NY
Zip Code: 12207
Business Phone: 516-776-1500
Fax Number: 518-814-1290
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Procurement
Level of Government Lobbied: Local
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name Last Name
KEITH D. SERNICK

Client Information

Client Business Name: TAX LIEN ADVISORS LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Country: US
Business Phone: 516-794-9100
Fax Number:
Chief Administrative Officer First Name: CHARLES
Chief Administrative Officer Last Name: BARREDO
Chief Administrative Officer Title: MANAGING MEMBER

Third party information

Name: AJM CAPITAL, LLC
Business Address 1: 2 COOPER SQUARE
Address 2: SUITE C
City: NEW YORK
State: NY
Zip Code: 10003  
Country: US  
Business Phone: 212-677-5788

Client Business Nature  
Select the category that best describes the nature of the Client's business:

- Banking & Financial Services  
- Communications  
- Education  
- Environment & Natural Resources  
- Health & Mental Hygiene  
- Insurance  
- Labor  
- Law  
- Manufacturing  
- Marketing & Sales  
- Public Utilities  
- Public, Community Interest  
- Racing & Wagering  
- Real Estate & Construction  
- State & Local Government  
- Trade Associations  
- Transportation  
- Travel & Tourism

Subject  
Subjects on which you expect to lobby:

TAX LIEN COLLECTIONS CONTRACTS

Person  
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

NASSAU COUNTY LEGISLATURE

Bill  
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title  
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter  
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter  
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations  
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same. ☑

Contract / Authorization Start Date (MM/DD/YYYY): 8/1/2011  
Contract / Authorization End Date (MM/DD/YYYY): 11/30/2011

Check here if mailing: ☑
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 8/7/2011
Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees
Please Check one of the following:

Amount: 0.0000

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00037081

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

Client Business Name: AMERICAN TAX FUNDING SERVICING LLC
Business Address 1: 345 JUPITER LAKES BLVD
Address 2: SUITE 300
City: JUPITER
State: FL
Zip Code: 33458
Country: US
Business Phone: (561) 842-2955
Fax Number: (561) 842-2946
Chief Administrative Officer First Name: MATT
Chief Administrative Officer Last Name: MARINI
Chief Administrative Officer Title: PRESIDENT

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
Zip Code:  
Country: US  
Business Phone:  

**Client Business Nature**  
Select the category that best describes the nature of the Client’s business  

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<th>Banking &amp; Financial Services</th>
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<th>Education</th>
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<td>Insurance</td>
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<td>Labor</td>
<td>Law</td>
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<td>Marketing &amp; Sales</td>
<td>Public Utilities</td>
<td>Public, Community Interest</td>
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<td>Racing &amp; Wagering</td>
<td>Real Estate &amp; Construction</td>
<td>State &amp; Local Government</td>
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<tr>
<td>Trade Associations</td>
<td>Transportation</td>
<td>Travel &amp; Tourism</td>
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**Subject**  
Subjects on which you expect to lobby:  

**CHANGES TO CHAPTER 510 OF 2013**  

**Person**  
Person, State Agency, Municipality, or Legislative Body you expect to lobby:  

**SENIOR BONASIC ASSEMBLY WOMAN GUNTHER**  

**Bill**  
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:  

No details were entered.  

**Title**  
Title and Identifying # of procurement contracts and documents on which you expect to lobby:  

No details were entered.  

**Number or Subject Matter**  
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:  

No details were entered.  

**Subject Matter**  
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:  

No details were entered.  

**Contract/Authorizations**  
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.  

**Contract / Authorization Start Date (MM/DD/YYYY) :** 4/28/2015  
**Contract / Authorization End Date (MM/DD/YYYY) :** 9/30/2015  

Check here if mailing: □
Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 5/22/2015
Actual submission date:
First Name: MARLA Last Name: BIER
Comments:

Fees
Please Check one of the following: 

Amount: $200.00
IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
- [ ] Check

Check No: 7020
Check Status: ACC

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to “Manage Profile” in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click “Remove” to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to “Manage Profile” in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: AMERICAN TAX FUNDING SERVICING LLC
Business Address 1: 345 JUPITER LAKES BLVD
Address 2: SUITE 300
City: JUPITER
State: FL
Zip Code: 33458
Country: US
Business Phone: (561) 842-2955
Fax Number: (561) 842-2946
Chief Administrative Officer First Name: MATTHEW
Chief Administrative Officer Last Name: MARINI
Chief Administrative Officer Title: PRESIDENT

Third party information
Name:
Business Address 1:
Address 2:
City:
State:
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

CHANGES TO THE REAL PROPERTY TAX LAW

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

CITY OF MIDDLETOWN

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 4/6/2013
Contract / Authorization End Date (MM/DD/YYYY) : 7/31/2013
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

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<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
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If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration

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(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 4/11/2013

Actual submission date: [ ]

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following: ☐

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

- Check/Cash

Check Status: ACC

Check No: 6443

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00030185

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
--- | ---
KEITH D. | SERNICK

Client Information

Client Business Name: BIGFOOT MEDIA PROPERTIES LLC
Business Address 1: 300 HAMILTON AVENUE
Address 2: SUITE B
City: WHITE PLAINS
State: NY
Zip Code: 10601
Country: US
Business Phone: 914-202-4979
Fax Number:
Chief Administrative Officer First Name: JEFFREY
Chief Administrative Officer Last Name: GERSON
Chief Administrative Officer Title: PRESIDENT

Third party information
Name:
Business Address 1:
Address 2:
City:
State:

EXHIBIT 3 - JCOPE 013
7/20/2016
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Communications
- Education
- Environment & Natural Resources
- Health & Mental Hygiene
- Insurance
- Labor
- Law
- Manufacturing
- Marketing & Sales
- Public Utilities
- Public, Community Interest
- Racing & Wagering
- Real Estate & Construction
- State & Local Government
- Trade Associations
- Transportation
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

NAMING RIGHTS FOR MUNICIPAL PROPERTIES

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

TOWN OF RAMAPO COUNTY OF ULSTER AND NASSAU

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date
(MM/DD/YYYY) : 11/1/2012

Contract / Authorization End Date
(MM/DD/YYYY) : 10/31/2013

Check here if mailing:
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>A71 stateadviserslic-bigfootmediapropertiesllc-30185.tif</td>
<td>BIG FOOT MEDIA PROPERTIES LLC REG 2013</td>
<td>4/9/2013 2:30:10 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJOCE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJOCE)

Date : 2/24/2013
Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees
Please Check one of the following: ☐

Amount : 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
- Check/Cash
  Check No: 2002

Check Status : REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00026593

Year of Registration: 2011-2012

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 146 STATE STREET
Address 2: SUITE 101-M
City: ALBANY
State: NY
Zip Code: 12207
Business Phone: 516-776-1500
Fax Number: 518-814-1290
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
--- | ---
KEITH D. | SERNICK

Client Information

Client Business Name: BIGFOOT MEDIA PROPERTIES LLC
Business Address 1: 300 HAMILTON AVENUE
Address 2: SUITE B
City: WHITE PLAINS
State: NY
Zip Code: 10601
Country: US
Business Phone: 914-202-4979
Fax Number:
Chief Administrative Officer First Name: JEFFREY
Chief Administrative Officer Last Name: GERSON
Chief Administrative Officer Title: PRESIDENT

Third party Information

Name:
Business Address 1:
Address 2:
City:
State:
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

NAMING RIGHTS FOR MUNICIPAL BUILDINGS CHANGES TO THE GENERAL MUNICIPAL LAW

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

NASSAU COUNTY ULSTER COUNTY TOWN OF RAMAPO

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY):

11/1/2012

Contract / Authorization End Date (MM/DD/YYYY):

10/31/2013

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 11/26/2012

Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees
Please Check one of the following:

Amount: $100.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
- Check/Cash

Check No: 1002

Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00030183

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: BLACKBOARD INC.
Business Address 1: 650 MASSACHUSETTS AVENUE NW
Address 2: 6TH FLOOR
City: WASHINGTON
State: DC
Zip Code: 20001
Country: US
Business Phone: 617-901-7458
Fax Number: 818-450-0425
Chief Administrative Officer First Name: MICHAEL
Chief Administrative Officer Last Name: STANTON
Chief Administrative Officer Title: PRESIDENT

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
NYS JOINT COMMISSION ON PUBLIC ETHICS ON LINE LOBBYIST REGISTRAT...

Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

PURCHASE OF EMERGENCY NOTIFICATION SYSTEMS

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

NASSAU, ALBANY, SUFFOLK AND ULSTER COUNTIES

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) :
1/1/2013

Contract / Authorization End Date (MM/DD/YYYY) :
12/31/2013

Check here if mailing:
✓
Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 2/24/2013

First Name: MARLA Last Name: BIER

Comments:

Fees
Please Check one of the following: ✔

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

• Check

Check No: 2000

Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035270

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

<table>
<thead>
<tr>
<th>Principal Lobbyist Name:</th>
<th>STATE ADVISERS, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Address 1:</td>
<td>100 QUENTIN ROOSEVELT BOULEVARD</td>
</tr>
<tr>
<td>Address 2:</td>
<td>SUITE 101</td>
</tr>
<tr>
<td>City:</td>
<td>GARDEN CITY</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>11530</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>516-776-1500</td>
</tr>
<tr>
<td>Fax Number:</td>
<td>516-794-2726</td>
</tr>
<tr>
<td>Email Address:</td>
<td><a href="mailto:KDS@STATEADVISERS.COM">KDS@STATEADVISERS.COM</a></td>
</tr>
<tr>
<td>Type of Lobbying:</td>
<td>Procurement</td>
</tr>
<tr>
<td>Level of Government Lobbied:</td>
<td>Local</td>
</tr>
<tr>
<td>Type of Lobbyist:</td>
<td>Retained</td>
</tr>
</tbody>
</table>

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

<table>
<thead>
<tr>
<th>Client Business Name:</th>
<th>CAPITAL WIRELESS, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Address 1:</td>
<td>300 HAMILTON AVENUE</td>
</tr>
<tr>
<td>Address 2:</td>
<td>SUITE B</td>
</tr>
<tr>
<td>City:</td>
<td>WHITE PLAINS</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>10601</td>
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<tr>
<td>Country:</td>
<td>US</td>
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<tr>
<td>Business Phone:</td>
<td>914-202-4979</td>
</tr>
<tr>
<td>Fax Number:</td>
<td></td>
</tr>
<tr>
<td>Chief Administrative Officer First Name:</td>
<td>JEFFREY D.</td>
</tr>
<tr>
<td>Chief Administrative Officer Last Name:</td>
<td>GERSOON</td>
</tr>
<tr>
<td>Chief Administrative Officer Title:</td>
<td>MANAGING MEMBER</td>
</tr>
</tbody>
</table>

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
**Client Business Nature**
Select the category that best describes the nature of the Client's business

<table>
<thead>
<tr>
<th>Category</th>
<th>Communications</th>
<th>Health &amp; Mental Hygiene</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banking &amp; Financial Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Environment &amp; Natural Resources</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marketing &amp; Sales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racing &amp; Wagering</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade Associations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Law</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Public Utilities</td>
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<td></td>
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<tr>
<td>Real Estate &amp; Construction</td>
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<td>Transportation</td>
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<tr>
<td>Insurance</td>
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<tr>
<td>Manufacturing</td>
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<tr>
<td>Public, Community Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State &amp; Local Government</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel &amp; Tourism</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subject**
Subjects on which you expect to lobby:

**INSTALLATION OF MICRO CELL TOWERS**

**Person**
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

**ULSTER COUNTY NASSAU COUNTY SUFFOLK COUNTY TOWN OF RAMAPO**

**Bill**
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

**Title**
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

**Number or Subject Matter**
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

**Subject Matter**
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

**Contract/Authorizations**
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

<table>
<thead>
<tr>
<th>Contract / Authorization Start Date (MM/DD/YYYY) :</th>
<th>6/15/2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract / Authorization End Date (MM/DD/YYYY)</td>
<td>6/30/2016</td>
</tr>
</tbody>
</table>

Check here if mailing:
Or

Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>A56_stateadvisers-capitalwireless-35270.tif</td>
<td>Capital Wireless 6.15.14_6.30.16 Reg 2015</td>
<td>10/13/2015 4:00:24 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 1/8/2015

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following: 7

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

• Check

Check No: 6440

Check Status: ACC

Prior to final submission please verify reporting year you have selected.
**Lobbyist Registration Form**

**Form Confirmation #: LR00032288**

**Year of Registration:** 2013-2014

**Principal Lobbyist Information**
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

- **Principal Lobbyist Name:** STATE ADVISERS, LLC
- **Business Address 1:** 100 QUENTIN ROOSEVELT BOULEVARD
- **Address 2:** SUITE 101
- **City:** GARDEN CITY
- **State:** NY
- **Zip Code:** 11530
- **Business Phone:** 516-776-1500
- **Fax Number:** 516-794-2726
- **Email Address:** KDS@STATEADVISERS.COM
- **Type of Lobbying:** Both
- **Level of Government Lobbied:** Both
- **Type of Lobbyist:** Retained

**Additional Lobbyist Information**
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

**Client Information**

- **Client Business Name:** CAPITAL WIRELESS, LLC
- **Business Address 1:** 300 HAMILTON AVENUE
- **Address 2:** SUITE B
- **City:** WHITE PLAINS
- **State:** NY
- **Zip Code:** 10601
- **Country:** US
- **Business Phone:** 914-202-4979
- **Fax Number:**

**Chief Administrative Officer Information**
- **Chief Administrative Officer First Name:** JEFFREY D.
- **Chief Administrative Officer Last Name:** GERSON
- **Chief Administrative Officer Title:** MANAGING MEMBER

**Third party information**

- **Name:**
- **Business Address 1:**
- **Address 2:**
- **City:**
- **State:**
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagening
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

ACQUISITION OF CELL TOWER SITES

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

TOWN OF RAMAPO SENATOR MAZIAZ

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 6/15/2014
Contract / Authorization End Date (MM/DD/YYYY) : 6/30/2016

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 6/25/2014  
Actual submission date:  
First Name: MARLA  
Last Name: BIER  
Comments: 

Fees
Please Check one of the following:  
Amount: $100.00  
IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
- Check/Credit  
Check No: 6439  
Check Status: ACC  

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR0030184

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu.)

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
-----------|----------
KEITH O. | SERNICK

Client Information

Client Business Name: CAREERARC GROUP LLC
Business Address 1: 3400 WEST OLIVE AVENUE
Address 2: SUITE 220
City: BURBANK
State: CA
Zip Code: 91505
Country: US
Business Phone: 818-260-3138
Fax Number:
Chief Administrative Officer First Name: ROBIN
Chief Administrative Officer Last Name: RICHARDS
Chief Administrative Officer Title: CEO

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

PURCHASE OF ON LINE JOB MARCHING SERVICE

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

TOWN OF RAMAPO COUNTIES OF ALBANY, NASSAU, ERIE, MONROE, SUFFOLK AND ULSTER CITY OF BUFFALO

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) :

1/1/2013

Contract / Authorization End Date (MM/DD/YYYY) :

12/31/2013

Check here if mailing:
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>L2205_Second Amendment to Consulting Agreement (Keith Sernick - Executed) copy.pdf</td>
<td>career arc group</td>
<td>2/24/2013 1:48:09 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 2/24/2013

Actual submission date:

First Name: MARLA
Last Name: BIER
Comments:

Fees

Please Check one of the following: ☐

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

☐ Check/Cash

Check No: 2001

Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00030353

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: State
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name Last Name
KEITH D. SERNICK

Client Information

Client Business Name: CELL SCIENCE SYSTEMS CORPORATION
Business Address 1: 852 SOUTH MILITARY TRAIL
Address 2:
City: DEERFIELD BEACH
State: FL
Zip Code: 33442
Country: US
Business Phone: 954-426-2304
Fax Number:
Chief Administrative Officer First Name: ROGER
Chief Administrative Officer Last Name: DEUTSCH
Chief Administrative Officer Title: CEO

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
**Client Business Nature**
Select the category that best describes the nature of the Client's business:

<table>
<thead>
<tr>
<th>Banking &amp; Financial Services</th>
<th>Communications</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environment &amp; Natural Resources</td>
<td>Health &amp; Mental Hygiene</td>
<td>Insurance</td>
</tr>
<tr>
<td>Labor</td>
<td>Law</td>
<td>Manufacturing</td>
</tr>
<tr>
<td>Marketing &amp; Sales</td>
<td>Public Utilities</td>
<td>Public, Community Interest</td>
</tr>
<tr>
<td>Racing &amp; Wagering</td>
<td>Real Estate &amp; Construction</td>
<td>State &amp; Local Government</td>
</tr>
<tr>
<td>Trade Associations</td>
<td>Transportation</td>
<td>Travel &amp; Tourism</td>
</tr>
</tbody>
</table>

**Subject**
Subjects on which you expect to lobby:

No details were entered.

**Person**
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

No details were entered.

**Bill**
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

**Title**
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

**Number or Subject Matter**
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

**Contract/Authorizations**
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

<table>
<thead>
<tr>
<th>Contract / Authorization Start Date (MM/DD/YYYY)</th>
<th>3/1/2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract / Authorization End Date (MM/DD/YYYY)</td>
<td>12/31/2013</td>
</tr>
</tbody>
</table>

Check here if mailing:
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

### Original Contract

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>A71_stateadviserslic-cellsciencessystems-corp-30353.tif</td>
<td>CELL SCIENCE SYSTEMS CORP REG 2013</td>
<td>4/9/2013 2:33:08 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

### Declaration

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 3/8/2013

Actual submission date: [ ]

First Name: MARLA  Last Name: BIER

Comments:

### Fees

Please Check one of the following: [ ]

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

### Payment Mode

- [ ] Check/Cash

Check No: 2125

Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035269

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

Client Business Name: COSMOLEDO LLC
Business Address 1: 921 BROADWAY
Address 2: 
City: NEW YORK
State: NY
Zip Code: 10271
Country: US
Business Phone: 917-209-6177
Fax Number: 
Chief Administrative Officer First Name: LOU
Chief Administrative Officer Last Name: RAMIREZ
Chief Administrative Officer Title: MANAGING PARTNER

Third party information

Name: 
Business Address 1: 
Address 2: 
City: 
State: 

EXHIBIT 3 - JCOPE 034
7/20/2016
NYS JOINT COMMISSION ON PUBLIC ETHICS ON LINE LOBBYIST REGISTRAT... Page 2 of 3

Zip Code: 
Country: 
Business Phone: 

Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Communications
- Environment & Natural Resources
- Health & Mental Hygiene
- Labor
- Insurance
- Marketing & Sales
- Manufacturing
- Racing & Wagering
- Public Utilities
- Real Estate & Construction
- Transportation
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

CHANGES TO THE ABC LAW

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

SENATE ASSEMBLY GOVERNORS OFFICE SLA NYC IDA

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 12/1/2014
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2015

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

<table>
<thead>
<tr>
<th>File Name</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 1/8/2015

Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees

Please check one of the following: 

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

- Check

Check No: 6444

Check Status: ACC

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00030306

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATE ADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: State
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

Client Business Name: ERIC KAYSER USA
Business Address 1: 1294 THIRD AVENUE
Address 2: 
City: NEW YORK
State: NY
Zip Code: 10021
Country: US
Business Phone: 917-209-6177
Fax Number: 
Chief Administrative Officer First Name: LOU
Chief Administrative Officer Last Name: RAMIREZ
Chief Administrative Officer Title: PRESIDENT

Third party information

Name: 
Business Address 1: 
Address 2: 
City: 
State:
Client Business Nature
Select the category that best describes the nature of the Client's business

<table>
<thead>
<tr>
<th>Banking &amp; Financial Services</th>
<th>Communications</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environment &amp; Natural Resources</td>
<td>Health &amp; Mental Hygiene</td>
<td>Insurance</td>
</tr>
<tr>
<td>Labor</td>
<td>Law</td>
<td>Manufacturing</td>
</tr>
<tr>
<td>Marketing &amp; Sales</td>
<td>Public Utilities</td>
<td>Public, Community Interest</td>
</tr>
<tr>
<td>Racing &amp; Wagering</td>
<td>Real Estate &amp; Construction</td>
<td>State &amp; Local Government</td>
</tr>
<tr>
<td>Trade Associations</td>
<td>Transportation</td>
<td>Travel &amp; Tourism</td>
</tr>
</tbody>
</table>

Subject
Subjects on which you expect to lobby:

CHANGES TO THE ABC LAW

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

SENATE ASSEMBLY SLA GOVERNOR'S OFFICE

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 2/1/2013
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2014

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
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<tbody>
<tr>
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<td>ERIC KAYSER USA REG 2013</td>
<td>4/9/2013 2:35:01 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 3/6/2013

First Name: MARLA  Last Name: BIER

Comments:

Fees
Please Check one of the following: 🔑

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
- Check/Cash: Check No: 2020

Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035271

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: EXTEND FERTILITY, LLC
Business Address 1: 1165 PARK AVENUE
Address 2: SUITE 2C
City: NEW YORK
State: NY
Zip Code: 10128
Country:
Business Phone: 917-837-2852
Fax Number:
Chief Administrative Officer First Name: ILAINA
Chief Administrative Officer Last Name: EDISON
Chief Administrative Officer Title: CEO

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

CHANGES TO THE EDC LAW

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

No details were entered.

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 1/1/2015
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2015

Check here if mailing:
Or

Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCPE)

Date: 1/8/2015

Actual submission date: [ ]

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following: ☐

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

- [ ] Check/Cash

Check No: 6432

Check Status: ACC

Prior to final submission please verify reporting year you have selected.

EXHIBIT 3 - JCOPE 042
7/20/2016
Lobbyist Registration Form

Form Confirmation #: LR00030186

Year of Registration: 2013-2014

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information

Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: HANSEL N' GRETAL BRAND INC.
Business Address 1: 79-19 71ST AVENUE
Address 2: 
City: QUEENS
State: NY
Zip Code: 11385
Country: US
Business Phone: 718-326-0041
Fax Number:
Chief Administrative Officer First Name: DAWN
Chief Administrative Officer Last Name: RATTNER
Chief Administrative Officer Title: EXECUTIVE VICE PRESIDENT

Third party information

Name:
Business Address 1: 
Address 2: 
City:
State:

EXHIBIT 3 - JCOPE 043
7/20/2016
Client Business Nature
Select the category that best describes the nature of the Client's business

<table>
<thead>
<tr>
<th>Banking &amp; Financial Services</th>
<th>Communications</th>
<th>Education</th>
</tr>
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<tbody>
<tr>
<td>Environment &amp; Natural Resources</td>
<td>Health &amp; Mental Hygiene</td>
<td>Insurance</td>
</tr>
<tr>
<td>Labor</td>
<td>Law</td>
<td>Manufacturing</td>
</tr>
<tr>
<td>Marketing &amp; Sales</td>
<td>Public Utilities</td>
<td>Public, Community Interest</td>
</tr>
<tr>
<td>Racing &amp; Wagering</td>
<td>Real Estate &amp; Construction</td>
<td>State &amp; Local Government</td>
</tr>
<tr>
<td>Trade Associations</td>
<td>Transportation</td>
<td>Travel &amp; Tourism</td>
</tr>
</tbody>
</table>

Subject
Subjects on which you expect to lobby:

GRANTS FROM THE ESDC

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

GOVERNORS OFFICE SENATOR GIANARIS ESDC

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:
No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:
No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:
No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:
No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 2/1/2013
Contract / Authorization End Date (MM/DD/YYYY) : 1/31/2014

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

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<td>Hansel N Gretal 2.1.13_1.31.14 Reg 2013</td>
<td>10/13/2015 2:11:12 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 2/24/2013
Actual submission date: [ ]
First Name: MARLA Last Name: BIER
Comments:

Fees
Please Check one of the following: ☐
Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
- [ ] Check

Check No: 2003
Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035263

Year of Registration: 2015-2016

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information

Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: PANNONE LOPES DEVEREAUX & WEST LLC
Business Address 1: 81 MAIN STREET
Address 2: SUITE 510
City: WHITE PLAINS
State: NY
Zip Code: 10601
Country: US
Business Phone: 401-824-5197
Fax Number: 401-824-9942
Chief Administrative Officer First Name: TENO A
Chief Administrative Officer Last Name: WEST, ESQ.
Chief Administrative Officer Title: PARTNER

Third party information

Name:
Business Address 1:
Address 2:
City:
State:

EXHIBIT 3 - JCOPE 046
7/20/2016
Zip Code: 
Country: 
Business Phone: 

Client Business Nature
Select the category that best describes the nature of the Client’s business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagening
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:
No details were entered.

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:
No details were entered.

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:
No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:
No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:
No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:
No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 5/1/2014
Contract / Authorization End Date (MM/DD/YYYY) : 4/30/2015

Check here if mailing:
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>FileName</th>
<th>Description</th>
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<td>5.1.15_4.30.15 Reg 2015</td>
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</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

<table>
<thead>
<tr>
<th>Date: 1/8/2015</th>
<th>Actual submission date:</th>
</tr>
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<tr>
<td></td>
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</tr>
</tbody>
</table>

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following:  

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

- Check/Cash

Check Status: ACC

Check No: 6441

Prior to final submission please verify reporting year you have selected.

7/20/2016
Lobbyist Registration Form

Form Confirmation #: LR00032182

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: PANNONE LOPES DEVEREAUX & WEST LLC
Business Address 1: 81 MAIN STREET
Address 2: SUITE 510
City: WHITE PLAINS
State: NY
Zip Code: 10601
Country: US
Business Phone: 401-824-5197
Fax Number: 401-824-9942
Chief Administrative Officer First Name: TENO A
Chief Administrative Officer Last Name: WEST, ESQ.
Chief Administrative Officer Title: PARTNER

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
Client Business Nature
Select the category that best describes the nature of the Client’s business

- Banking & Financial Services
- Communications
- Education
- Environment & Natural Resources
- Health & Mental Hygiene
- Insurance
- Labor
- Law
- Manufacturing
- Marketing & Sales
- Public Utilities
- Public, Community Interest
- Racing & Wagering
- Real Estate & Construction
- State & Local Government
- Trade Associations
- Transportation
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

No details were entered.

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

No details were entered.

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY):
5/1/2014

Contract / Authorization End Date (MM/DD/YYYY):
4/30/2015

Check here if mailing:
Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

<table>
<thead>
<tr>
<th>FileName</th>
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</table>

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(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 5/22/2014

Actual submission date: [ ]

First Name: MARLA  Last Name: BIER

Comments: [ ]

Fees
Please Check one of the following: [ ]

Amount: 100.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode
• Check/Cash

Check No: 6442

Check Status: ACC

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035257

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

Client Business Name: GROVE CONSULTING
Business Address 1: 1450 BRICKELL AVENUE
Address 2: 31ST FLOOR
City: MIAMI
State: FL
Zip Code: 33131
Country: US
Business Phone: 305-379-2322
Fax Number: 305-381-4132
Chief Administrative Officer First Name: JIM
Chief Administrative Officer Last Name: CAMPBELL
Chief Administrative Officer Title: MEMBER

Third party information

Name: READY PAC FOODS, INC.
Business Address 1: 4401 FOXDALE AVE
Address 2: IRWINDALE
City: FL

7/20/2016
Zip Code: 91706  
Country: US  
Business Phone: 626-678-2372

**Client Business Nature**
Select the category that best describes the nature of the Client's business:

- **Banking & Financial Services**  
- Environment & Natural Resources  
- Labor  
- Marketing & Sales  
- Racing & Wagering  
- Trade Associations  
- Communications  
- Health & Mental Hygiene  
- Law  
- Public Utilities  
- Real Estate & Construction  
- Transportation  
- Education  
- Insurance  
- Manufacturing  
- Public, Community Interest  
- State & Local Government  
- Travel & Tourism

**Subject**
Subjects on which you expect to lobby:

**ECONOMIC DEVELOPMENT FUNDING**

**Person**
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

**ESD GOVERNOR'S OFFICE SENAT ASSEMBLY COUNTY OF ONONDAGA**

**Bill**
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

**Title**
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

**Number or Subject Matter**
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

**Subject Matter**
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

**Contract/Authorizations**
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 8/1/2013
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2016

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

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If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 1/8/2015

Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following:  

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

- Check/Cash

Check No: 6436

Check Status: ACC

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00031175

Year of Registration: 2013-2014

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information

Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
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<tbody>
<tr>
<td>RYAN</td>
<td>KARBEN</td>
</tr>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

Client Business Name: GROVE CONSULTING
Business Address 1: 1450 BRICKELL AVENUE
Address 2: 31ST FLOOR
City: MIAMI
State: FL
Zip Code: 33131
Country: US
Business Phone: 305-379-2322
Fax Number: 305-381-4132
Chief Administrative Officer First Name: JIM
Chief Administrative Officer Last Name: CAMPBELL
Chief Administrative Officer Title: MEMBER

Third party information

Name: READY PAC FOODS, INC.
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<tr>
<th>Business Address 1:</th>
<th>4401 FOXDALE AVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address 2:</td>
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<tr>
<td>City:</td>
<td>IRWINDALE</td>
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<td>State:</td>
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<td>Zip Code:</td>
<td>91706</td>
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<tr>
<td>Country:</td>
<td>US</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>626-678-2372</td>
</tr>
</tbody>
</table>

**Client Business Nature**

Select the category that best describes the nature of the Client’s business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

**Subject**

Subjects on which you expect to lobby:

SEEKING FUNDING THROUGH ESOC FOR BUILDING OF A MANUFACTURING PLANT

**Person**

Person, State Agency, Municipality, or Legislative Body you expect to lobby:

ESDC; ONONDAGA COUNTY EXECUTIVE: NIAGARA COUNTY EXECUTIVE

**Bill**

Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

**Title**

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

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No details were entered.

**Number or Subject Matter**
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

**Subject Matter**
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

**Contract/Authorizations**
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 8/1/2013

Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2014

Check here if mailing:  

Or

Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

**Original Contract**

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</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

**Declaration**

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date : 9/13/2013

Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees
Please Check one of the following:

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

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</table>

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035262

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

<table>
<thead>
<tr>
<th>Principal Lobbyist Name:</th>
<th>STATE ADVISERS, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Address 1:</td>
<td>100 QUENTIN ROOSEVELT BOULEVARD</td>
</tr>
<tr>
<td>Address 2:</td>
<td>SUITE 101</td>
</tr>
<tr>
<td>City:</td>
<td>GARDEN CITY</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>11530</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>516-776-1500</td>
</tr>
<tr>
<td>Fax Number:</td>
<td>516-794-2726</td>
</tr>
<tr>
<td>Email Address:</td>
<td><a href="mailto:KDS@STATEADVISERS.COM">KDS@STATEADVISERS.COM</a></td>
</tr>
<tr>
<td>Type of Lobbying:</td>
<td>NonProcurement</td>
</tr>
<tr>
<td>Level of Government Lobbied:</td>
<td>State</td>
</tr>
<tr>
<td>Type of Lobbyist:</td>
<td>Retained</td>
</tr>
</tbody>
</table>

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
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</tr>
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<tbody>
<tr>
<td>KEITH D.</td>
<td>SERNICK</td>
</tr>
</tbody>
</table>

Client Information

<table>
<thead>
<tr>
<th>Client Business Name:</th>
<th>TOWN OF RAMAPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Address 1:</td>
<td>237 ROUTE 59</td>
</tr>
<tr>
<td>Address 2:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>SUFFERN</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>10901</td>
</tr>
<tr>
<td>Country:</td>
<td>US</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>845-357-5100</td>
</tr>
<tr>
<td>Fax Number:</td>
<td></td>
</tr>
<tr>
<td>Chief Administrative Officer First Name:</td>
<td>CHRISTOPHER</td>
</tr>
<tr>
<td>Chief Administrative Officer Last Name:</td>
<td>ST. LAWRENCE</td>
</tr>
<tr>
<td>Chief Administrative Officer Title:</td>
<td>SUPERVISOR</td>
</tr>
</tbody>
</table>

Third party information

Name:
Business Address 1:
Address 2:
City:
State:
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Communications
- Education
- Environment & Natural Resources
- Health & Mental Hygiene
- Insurance
- Labor
- Law
- Manufacturing
- Marketing & Sales
- Public Utilities
- Public, Community Interest
- Racing & Wagering
- Real Estate & Construction
- State & Local Government
- Trade Associations
- Transportation
- Travel & Tourism

Subject
Subjects on which you expect to lobby:
No details were entered.

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:
No details were entered.

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:
No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:
No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:
No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:
No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 1/1/2015
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2015

Check here if mailing:
Click here to upload signed contract/authorizations:

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

<table>
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<tr>
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<th>Description</th>
<th>Date</th>
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<td>Town of Ramapo</td>
<td>10/13/2015 4:23:21 PM</td>
</tr>
</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 1/8/2015

Actual submission date: [ ]

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following: [ ]

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

- Check/Cash

Check No: 6433

Check Status: ACC

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00030187

Year of Registration: 2013-2014

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

<table>
<thead>
<tr>
<th>Principal Lobbyist Name:</th>
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<td>SUITE 101</td>
</tr>
<tr>
<td>City:</td>
<td>GARDEN CITY</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>11530</td>
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<td>516-794-2726</td>
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<tr>
<td>Email Address:</td>
<td><a href="mailto:KDS@STATEADVISERS.COM">KDS@STATEADVISERS.COM</a></td>
</tr>
<tr>
<td>Type of Lobbying:</td>
<td>Both</td>
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<td>Level of Government Lobbied:</td>
<td>Both</td>
</tr>
<tr>
<td>Type of Lobbyist:</td>
<td>Retained</td>
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Additional Lobbyist Information

Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
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<td>KEITH D.</td>
<td>SERNICK</td>
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<td>State:</td>
<td>NY</td>
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<tr>
<td>Chief Administrative Officer Title:</td>
<td>SUPERVISOR</td>
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</tbody>
</table>

Third party information

Name:

Business Address 1:

Address 2:

City:

State:
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Communications
- Education
- Environment & Natural Resources
- Health & Mental Hygiene
- Insurance
- Labor
- Law
- Manufacturing
- Marketing & Sales
- Public Utilities
- Public, Community Interest
- Racing & Wagering
- Real Estate & Construction
- State & Local Government
- Trade Associations
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- Travel & Tourism

Subject
Subjects on which you expect to lobby:

No details were entered.

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

No details were entered.

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

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Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 2/1/2013
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2013

Check here if mailing:
Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
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<td>10/13/2015 2:00:03 PM</td>
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</tbody>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 2/24/2013

Actual submission date: [ ]

First Name: MARLA Last Name: BIER

Comments:

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<tr>
<th>Fees</th>
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<td>Amount: 200.00</td>
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</table>

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

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<tr>
<th>Payment Mode</th>
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<tbody>
<tr>
<td>☐ Check/Cash</td>
</tr>
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<td>Check Status: REJ</td>
</tr>
<tr>
<td>Check No: 2004</td>
</tr>
</tbody>
</table>

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00035281

Year of Registration: 2015-2016

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 100 QUENTIN ROOSEVELT BOULEVARD
Address 2: SUITE 101
City: GARDEN CITY
State: NY
Zip Code: 11530
Business Phone: 516-776-1500
Fax Number: 516-794-2726
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
--- | ---
KEITH D. | SERNICK

Client Information

Client Business Name: VMC CONSULTANTS, LP
Business Address 1: 9701 NIAGARA FALLS BOULEVARD
Address 2: SUITE 1A
City: NIAGARA FALLS
State: NY
Zip Code: 14304
Country: US
Business Phone: 716-285-6000
Fax Number: 716-285-1000
Chief Administrative Officer First Name: CHARLES J.
Chief Administrative Officer Last Name: GANIM, PHD
Chief Administrative Officer Title: CEO

Third party Information

Name: VAL TRAN, INC./ADVANCE TRANSPORTATION SOLUTIONS
Business Address 1: 9701 NIAGARA FALLS BOULEVARD
Address 2: SUITE 1A
City: NIAGARA FALLS
State: NY

7/21/2016
Zip Code: 14304  
Country: US  
Business Phone: 716-285-6000

Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

PURCHASE OF TRANSPORTATION MANAGEMENT FOR PRE-SCHOOL HANDICAPPED STUDENTS

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

ALBANY COUNTY NASSAU COUNTY SUFFOLK COUNTY ULSTER COUNTY ORANGE COUNTY

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 1/1/2015
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2015

Check here if mailing:
Click here to upload signed contract/authorizations:

Choose previous uploaded and unassigned contract/authorization(s) below:

<table>
<thead>
<tr>
<th>File Name</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Person's signature was on the original paper form submitted to NYSJCOPE)

Date: 1/8/2015

Actual submission date: 

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following: 

Amount: $200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

☐ Check/Cash

Check No: 1235

Check Status: REJ

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00030188

Year of Registration: 2013-2014

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

<table>
<thead>
<tr>
<th>Principal Lobbyist Name:</th>
<th>STATE ADVISERS, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Address 1:</td>
<td>100 QUENTIN ROOSEVELT BOULEVARD</td>
</tr>
<tr>
<td>Address 2:</td>
<td>SUITE 101</td>
</tr>
<tr>
<td>City:</td>
<td>GARDEN CITY</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>11530</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>516-776-1500</td>
</tr>
<tr>
<td>Fax Number:</td>
<td>516-794-2726</td>
</tr>
<tr>
<td>Email Address:</td>
<td><a href="mailto:KDS@STATEADVISERS.COM">KDS@STATEADVISERS.COM</a></td>
</tr>
<tr>
<td>Type of Lobbying:</td>
<td>Both</td>
</tr>
<tr>
<td>Level of Government Lobbied:</td>
<td>Both</td>
</tr>
<tr>
<td>Type of Lobbyist:</td>
<td>Retained</td>
</tr>
</tbody>
</table>

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEITH</td>
<td>SERNICK</td>
</tr>
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</table>

Client Information

<table>
<thead>
<tr>
<th>Client Business Name:</th>
<th>VMC CONSULTANTS, LP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Address 1:</td>
<td>9701 NIAGARA FALLS BOULEVARD</td>
</tr>
<tr>
<td>Address 2:</td>
<td>SUITE 1A</td>
</tr>
<tr>
<td>City:</td>
<td>NIAGARA FALLS</td>
</tr>
<tr>
<td>State:</td>
<td>NY</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>14304</td>
</tr>
<tr>
<td>Country:</td>
<td>US</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>716-285-6000</td>
</tr>
<tr>
<td>Fax Number:</td>
<td>716-285-1000</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Chief Administrative Officer First Name:</td>
<td>CHARLES J.</td>
</tr>
<tr>
<td>Chief Administrative Officer Last Name:</td>
<td>GANIM, PHD</td>
</tr>
<tr>
<td>Chief Administrative Officer Title:</td>
<td>CEO</td>
</tr>
</tbody>
</table>

Third party information

| Name: | VAL TRAN, INC./ADVANCE TRANSPORTATION SOLUTIONS |
| Business Address 1: | 9701 NIAGARA FALLS BOULEVARD |
| Address 2: | SUITE 1A |
| City: | NIAGARA FALLS |
| State: | NY |
NYS JOINT COMMISSION ON PUBLIC ETHICS ON LINE LOBBYIST REGISTRAT... Page 2 of 3

Zip Code: 14304
Country: US
Business Phone: 716-285-6000

Client Business Nature
Select the category that best describes the nature of the Client’s business

- Banking & Financial Services
- Communications
- Education
- Environment & Natural Resources
- Health & Mental Hygiene
- Insurance
- Labor
- Law
- Manufacturing
- Marketing & Sales
- Public Utilities
- Public, Community Interest
- Racing & Wagering
- Real Estate & Construction
- State & Local Government
- Trade Associations
- Transportation
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

PRE-SCHOOL MEDICARE TRANSPORTATION ISSUES

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

STATE COMPTROLLER COUNTY OF NASSAU COUNTY OF ALBANY COUNTY OF RENNSALEAR COUNTY OF SUFFOLK

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 1/1/2013
Contract / Authorization End Date (MM/DD/YYYY) : 12/31/2013

Check here if mailing: ☑
Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 2/24/2013

Actual submission date:

First Name: MARLA Last Name: BIER

Comments:

Fees

Please Check one of the following:

Amount: 200.00

IMPORTANT: Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

● Check/Cash

Check Status: REJ

Check No: 2005

Prior to final submission please verify reporting year you have selected.
Lobbyist Registration Form

Form Confirmation #: LR00022696

Year of Registration: 2011-2012

Principal Lobbyist Information
(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: STATE ADVISERS, LLC
Business Address 1: 146 STATE STREET
Address 2: SUITE 101-M
City: ALBANY
State: NY
Zip Code: 12207
Business Phone: 516-776-1500
Fax Number: 518-814-1290
Email Address: KDS@STATEADVISERS.COM
Type of Lobbying: Both
Level of Government Lobbied: Both
Type of Lobbyist: Retained

Additional Lobbyist Information
Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name | Last Name
---|---
KEITH D. | SERNICK

Client Information

Client Business Name: VMC CONSULTANTS, LP
Business Address 1: 9701 NIAGARA FALLS BOULEVARD
Address 2: SUITE 1A
City: NIAGARA FALLS
State: NY
Zip Code: 14304
Country: US
Business Phone: 716-285-6000
Fax Number: 716-285-1000
Chief Administrative Officer First Name: CHARLES J.
Chief Administrative Officer Last Name: GANIM, PHD
Chief Administrative Officer Title: CEO

Third party information

Name: VAL TRAN, INC./ADVANCE TRANSPORTATION SOLUTIONS
Business Address 1: 9701 NIAGARA FALLS BOULEVARD
Address 2: SUITE 1A
City: NIAGARA FALLS
State: NY

EXHIBIT 3 - JCOPE 071
7/20/2016
Client Business Nature
Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject
Subjects on which you expect to lobby:

PRE SCHOOL HANDICAPPED CHILDREN BUSING ISSUE

Person
Person, State Agency, Municipality, or Legislative Body you expect to lobby:

NASSAU COUNTY

Bill
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title
Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter
Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter
Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations
You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same.

Contract / Authorization Start Date (MM/DD/YYYY) : 5/1/2009
Contract / Authorization End Date (MM/DD/YYYY) : 4/30/2011

Check here if mailing:
Or

Click here to upload signed contract/authorizations:

Or
Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

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<th>Description</th>
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If an uploaded contract/authorization does not appear, click here to see updated list of choices:

Declaration
I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date: 1/2/2011
Actual submission date:

First Name: MARLA Last Name: BIER
Comments:

Fees
Please Check one of the following:

Amount: 200.00
IMPORTANT: Please choose your payment carefully – Registration fees are non-refundable.

Payment Mode
• Check/Cash

Check No: 1236

Check Status: REJ

Prior to final submission please verify reporting year you have selected.